**2004 FOR PROFIT CORPORATION** 

SIGNATURE:

ANNUAL REPORT (AR)					_ FILED	
DOCUMENT # 397437 1. Entity Name					Feb 06, 2004 AM Secretary of State E.	D
WALTER HAAS & SONS, INC.					By. 2004	
Principal Place of Business Mailing Address						
		123 WEST 23RD STRE HIALEAH FL 33010				=]
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt #, etc		•	MOORE CR2E034 (11/03)	
City & State		City & State			4. FEI Number 59-1420342 Applied For Not Applied	
Zip	Country	Zıp	Coun	itry	5. Certificate of Status Desired See Sequired Fee Required	
	6. Name and Address of Current I	Registered Agent		******	7. Name and Address of New Registered Agent	
HAAS,WALTER			:	Name		
123 W 23RD ST HIALEAH FL 33010				Street Address (F	(P.O. Box Number is Not Acceptable)	
				City	Zip Code	_
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept						
the obligations of registered agent.						
SIGNATURE.	Signature, typed or printed name of registered agent a	and little if applicable (NOT)	E Registere	ed Agent signáture resjúrad	od whon reinstating) DATE	-
FILE NOW!!! FEE IS \$150.00					2.5	_
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State					9. Election Campaign Financing \$5.00 May 8 Trust Fund Contribution.  Added to Fees	e
10.	OFFICERS AND		11.	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
BILE	Т	☐ Delete	IIILE	····	☐ Change ☐ Addi	tion
NAME	HAAS,WALTER		NAM!	NE EET ADDRESS	U00000038132	
STREET ADDRESS CITY-ST-ZIP	123 WEST 23RD STREET HIALEAH FL 33010		SIRLEI CITY-S		02/05/04-80127-003 150.00	
TITLE	P	☐ Delete	INTE	E	☐ Change ☐ Addi	tion
NAME STREET ADDRESS	HAAS,MARIANNE		NAM:	1		
CITY-ST-ZIP	123 WEST 23RD STREET HIALEAH FL 33010			EET ADORESS !+ST-ZIP		
BILE	VP	☐ Delete	TELE	£	☐ Change ☐ Addi	tion
KAME	HAAS, GARY		MAM	į.	•	
STREET ADDRESS CITY+ST-ZIP	123 WEST 23RD STREET HIALEAH FL 33010			FET ADDRESS 1-ST-ZIP		1
TITLE	VP	☐ Delete	TITLE		☐ Change ☐ Addi	lion
NAME	HAAS, PATRICK		NAM	- 1	_ ·	
STREET ADDRESS CITY-ST-ZIP	123 WEST 23RD STREET HIALEAH FL 33010			EET ADDRESS (+ST-7)P		
TITLE	RS	☐ Delete	INL		☐ Change ☐ Addi	noif
NAME	LOHMEYER, CHRISTINE		NAM	Į.		
STREET ADDRESS CITY-ST-ZIP	123 WEST 23RD STREET HIALEAH FL 33010		. I	EET ADDRESS ( -ST-ZIP		
TILE	S	☐ Delete	TITLE		☐ Change ☐ Addi	Binn
NAME	LOHMEYER, DAVID	T POICIE	NAM	1	<u>्र</u> जासामुक ्राक्त	Buri
STREET ADDRESS	123 WEST 23RD STREET HIALEAH FL 33010			EET ADDRESS		
CITY-ST-ZIP	L	3. Dr J and an 272. Fa		r-ST-ZIP	The second of th	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that i am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an eddress with all other like empowered.						
CICNIAT	COM OH	Sth Chi	rict	TUPP 1	DAMPCIEV 2-14/04	