
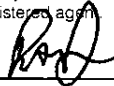



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90019 013 ****61.25

DOCUMENT # 726122			
1. Entity Name MEADOWBROOK I-J-K-L CORPORATION, INC.			
Principal Place of Business 319 NE 14TH AVE 106 HALLANDALE, FL 33009 US		Mailing Address 319 NE 14TH AVE 106 HALLANDALE, FL 33009 US	
2. Principal Place of Business 301 N.E. 14th Avenue Suite, Apt. #, etc. #301 City & State Hallandale Beach, Fl		3. Mailing Address 301 N.E. 14th Avenue Suite, Apt. #, etc. #301 City & State Hallandale Beach, Fl	
4. FEI Number 59-1446098		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MALKIN, HOWARD 319 NE 14TH AVE #106 HALLANDALE, FL 33009		7. Name and Address of New Registered Agent Name Richard Ryan Street Address (P.O. Box Number is Not Acceptable) 301 N.E. 14th Avenue #301 City Hallandale Beach FL Zip Code 33009	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		Richard Ryan 2/27/04	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating) DATE	
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DEUTCHMAN, SAM 319 NE 14TH AVE., #704 HALLANDALE BEACH, FL 33009 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Milton Cornell 319 N.E. 14th Avenue #103 Hallandale Beach, Fl 33009 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TYTELL, ARLYNE 301 NE 14TH AVE #701 HALLANDALE BEACH, FL 33009 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jeff Naftell 301 N.E. 14th Avenue # Hallandale Beach, Fl 33009 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARELLA, JOSEPH 320 NE 12TH AVE A-208 HALLANDALE BEACH, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELISSER, TRINA 300 NE 12TH AVE., #601 HALLANDALE BEACH, FL 33009 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Frank Gaff 320 N.E. 12th Avenue #303 Hallandale Beach, Fl 33009 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARANZULLO, THERESA 300 NE 12TH AVENUE, #108 HALLANDALE BEACH, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MALKIN, HOWARD 319 NE 14TH AVE 106 HALLANDALE BEACH, FL 33009 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Richard Ryan 301 N.E. 14th Avenue #301 Hallandale Beach, Fl 33009 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Richard Ryan, President 2/27/04 954-	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

J4014489



01312004 Chg-NP CR2E037 (10/03)