


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000003562 1. Entity Name STEPHEN A. ESTRIN & CO., INC.		
Principal Place of Business 2114 BISPHAM RD., SUITE 3 SARASOTA, FL 34231	Mailing Address 2114 BISPHAM RD., SUITE 3 SARASOTA, FL 34231	
01122004 No Chg-P CR2E034 (10/03)		
4. FEI Number 14-1564754		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ESTRIN, KAREN J 2114 BISPHAM RD., SUITE 3 SARASOTA, FL 34231		
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: <u><i>Karen J. Estrin</i></u> <u><i>KAREN J. ESTRIN</i></u> <u><i>1/14/04</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ESTRIN, STEPHEN A 2114 BISPHAM RD., SUITE 3 SARASOTA, FL 34231	U00000006617 01/16/04-80043-001 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS WOLSTENHOLME, GEORGE V 2114 BISPHAM RD., SUITE 3 SARASOTA, FL 34231	
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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 address, with all other like empowered.		
SIGNATURE: <u><i>[Signature]</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u><i>1/14/04</i></u> <u><i>(953)964-9651</i></u> <small>Date Daytime Phone #</small>