## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Mar 31, 2004 08:00 AM DOCUMENT # F85851 **Secretary of State** 1. Entity Name THE PERLMAN GROUP, INC. Principal Place of Business Mailing Address % HUGH J. PERLMAN % HUGH J. PERLMAN 206 GREEN LAKE CIRCLE 206 GREEN LAKE CIRCLE LONGWOOD, FL 32779 LONGWOOD, FL 32779 No Chg-P CR2E034 (10/03) 01152004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2219209 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent PERLMAN, HUGH J. DO NOT WRITE 206 GREEN LAKE CIRCLE LONGWOOD, FL 32779 IN THIS SPACE 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 Signature, speed or printed name of registered agent and like if applicable. (NOTE: Registered Agent signature required when reinstaking) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. F 3 U00000099374 Added to Fees <u>/31/04-80003-008 150 00</u> OFFICERS AND DIRECTORS 10. TILE MARKE PERLMAN, HUGH J. STREET ADDRESS 206 GREEN LAKE CIRCLE CITY-ST-7IP LONGWOOD, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP BILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 supplimental 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 willying address, with all other like empowered.

SIGNATURE:

DITY-57-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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