


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # G78576**

1. Entity Name  
**S & S PROPERTIES, INC.**



Principal Place of Business 1915 NE 45 STR STE 207 FT LAUDERDALE, FL 33308 US	Mailing Address 1915 NE 45 STR STE 207 FT LAUDERDALE, FL 33308 US
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**DO NOT WRITE IN THIS SPACE**



03162004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-2363390</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BUJALSKI, STANLEY J.**  
**1915 NE 45 STR**  
**STE 207**  
**FT LAUDERDALE, FL 33308**

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U000000117194  
 04/19/04-80010-002 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BUJALSKI, STANLEY J. 1915 NE 45 STR STE 207 FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUJALSKI, ALICE M. 1915 NE 45 STR STE 207 FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUJALSKI, STANLEY B. 1915 NE 45 STR STE 207 FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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** *Stanley B. Bujalski, Secy & Treas* **APRIL 15 2004**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

STANLEY B. BUJALSKI