2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 20, 2004 8:00 am
Secretary of State
05-20-2004 90008 024 ***150.00

DOCUMENT # H91248

1. Entity Name
SOUTH FLORIDA ENERGY, INC.

Principal Place of Business	Mailing Address
MARKOWITZ FENELON & BANK, LLP 300 PANTIGO PLACE, SUITE 109 EAST HAMPTON, NY 11937	MARKOWITZ FENELON & BANK, LLP 300 PANTIGO PLACE, SUITE 109 EAST HAMPTON, NY 11937

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03012003 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0001794
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FENELON, DAVID
% SHAW AERO DEVICES
12291 TOWNE LAKE DRIVE
FT. MYERS, FL 33913

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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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	VOULIERIS, MICHAEL
STREET ADDRESS	1420 SHERBROOKE ST. WEST
CITY-ST-ZIP	MONTREAL,QUEBEC, CAN,
TITLE	V
NAME	TERYAZOS LEONTIS
STREET ADDRESS	1420 SHERBROOKE ST. WEST
CITY-ST-ZIP	MONTREAL,QUEBEC, CAN,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 14 MAY 2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

LEONTIS TERYAZOS