

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K85020

FILED
Feb 10, 2004
Secretary of State

Entity Name: ARRIGO ENTERPRISES, INC.

Current Principal Place of Business:

2101 OKEECHOBEE BOULEVARD
WEST PALM BEACH, FL 33409

New Principal Place of Business:

6500 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33411

Current Mailing Address:

2101 OKEECHOBEE BOULEVARD
WEST PALM BEACH, FL 33409

New Mailing Address:

6500 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33411

FEI Number: 65-0117477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICHARDSON, KEVIN F
1551 FORUM PL
STE 300F
WEST PALM BCH, FL 33409 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARRIGO, JAMES J
Address: 2101 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VD () Delete
Name: ARRIGO, JOHN J
Address: 2101 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: STD () Delete
Name: ARRIGO, VIRGINIA M
Address: 2101 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIRGINIA ARRIGO

STD

02/10/2004

Electronic Signature of Signing Officer or Director

_____ Date