

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057438

Entity Name: STREAMLINE SALES, INC.

FILED
Apr 05, 2004
Secretary of State

Current Principal Place of Business:

8332 NW 201 TERRACE
MIAMI, FL 33015

Current Mailing Address:

8332 NW 201 TERRACE
MIAMI, FL 33015

FEI Number: 65-1016648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, JACQUELINE
8332 NW 201 TERRACE
MIAMI, FL 33015 US

New Principal Place of Business:

15855 MIAMI LAKEWAY NORTH
250
MIAMI LAKES, FL 33015

New Mailing Address:

15855 MIAMI LAKEWAY NORTH
250
MIAMI LAKES, FL 33014

Name and Address of New Registered Agent:

GARCIA, JACQUELINE
15855 MIAMI LAKEWAY NORTH
MIAMI LAKES, FL 33014 US

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

04/05/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: GARCIA, JACQUELINE
Address: 8332 NW 201 TERRACE
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: GARCIA, JACQUELINE
Address: 15855 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

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: JACQUELINE GARCIA

PST

04/05/2004

Electronic Signature of Signing Officer or Director

Date