

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060861

FILED
Jan 07, 2004
Secretary of State

Entity Name: COMPLETE TICKET SOLUTIONS, INC.

Current Principal Place of Business:

4801 S UNIVERSITY DR
STE 119B
DAVIE, FL 33328

New Principal Place of Business:

5201 RAVENSWOOD RD
SUITE 103
FORT LAUDERDALE, FL 33312

Current Mailing Address:

4801 S UNIVERSITY DR
STE 119B
DAVIE, FL 33328

New Mailing Address:

5201 RAVENSWOOD RD
SUITE 103
FORT LAUDERDALE, FL 33312

FEI Number: 65-1020357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZ, DANIEL W
12914 STONEBROOK DR.
DAVIE, FL 33330

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: PTS () Delete
Name: KATZ, DANIEL W
Address: 12914 STONEBROOK DR.
City-St-Zip: DAVIE, FL 33330

Title: V () Delete
Name: MARIN, IVAN
Address: 12250 SW 122 PATH
City-St-Zip: MIAMI, FL 33186

Title: V () Delete
Name: AXMAN, DAN
Address: 9020 VINEYARD LAKE DR.
City-St-Zip: PLANTATION, FL 33324

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: DANIEL W. KATZ

PTS

01/07/2004

Electronic Signature of Signing Officer or Director

_____ Date