2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000022448

1. Entity Name
ATTORNEY JAMES VOLPI, P.A.

Principal Place of Business

101 E BLUE HERON BLVD STE 201 RIVIERA BCH, FL 33404 Mailing Address

101 E BLUE HERON BLVD STE 201 RIVIERA BCH, FL 33404 FILED Jul 07, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE 07012004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1083530 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

VOLPI, JAMES C 101 E BLUE HERON BLVD STE 201 RIVIERA BCH, FL 33404

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	named entity submits this statement for the lons of registered agent.	purpose of changing its registere	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and talls if applicable. (NOTE: Registered Agent signature required when renstating) DATE						
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 9. Election Campaign Finance Trust Fund Contribution.			icing	\$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 DIRE	CTORS		yan kanamata		
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12. I hereby certify that the information supplied with this filling 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 of 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 all other like empowered.						

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR