

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047405

FILED
Jan 08, 2004
Secretary of State

Entity Name: BEHAR FAMILY INC.

Current Principal Place of Business:

16445 COLLINS AVENUE #724
MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

16445 COLLINS AVENUE #724
MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 75-3081518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFE, RICHARD C ESQ.
ONE BISCAYNE TOWER - SUITE 2400
TWO SOUTH BISCAYNE BOULEVARD
MIAMI, FL 33131 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: P () Delete
Name: BEHAR, MOISES
Address: 16445 COLLINS AVENUE #724
City-St-Zip: MIAMI BEACH, FL 33160

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V () Change (X) Addition
Name: BEHAR, MERCEDES
Address: 16445 COLLINS AVE #724
City-St-Zip: MIAMI BEACH, FL 33160

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: MOISES BEHAR

P

01/08/2004

Electronic Signature of Signing Officer or Director

_____ Date