


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 03, 2004 8:00 am**  
**Secretary of State**

09-03-2004 90004 033 \*\*\*150.00

**DOCUMENT # P02000054726**

1. Entity Name  
**GORDONSTOUN, INC.**



Principal Place of Business 501 BRICKELL KEY DR SUITE 504 MIAMI, FL 33131	Mailing Address 501 BRICKELL KEY DR SUITE 504 MIAMI, FL 33131
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**64000410**



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

08262004 Chg-P CR2E034 (10/03)

4. FEI Number <b>46-0483737</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**NICOLAS J WATKINS P A**  
**501 BRICKELL KEY DR**  
**SUITE 504**  
**MIAMI, FL 33131**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_

City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$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 DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ALVAREZ, GUILLERMO 501 BRICKELL KEY DR #504 MIAMI, FL 33131 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NICOLAS J WATKINS P A 501 BRICKELL KEY DR, #504 MIAMI, FL 33131 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>S. Nicolas J. Watkins                      501 Brickell Key Dr., #504                      Miami, FL 33131</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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 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 an address, with other like empowered.

**SIGNATURE:**  **Nicolas J. Watkins** **8/26/04** **(305) 377-1274**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment 24083418  
# P02000054726

**HOWE, ROBINSON & WATKINS, LLP**  
*Attorneys at Law*

Courvoisier Centre I, Suite 504  
501 Brickell Key Drive, Miami, FL 33131  
Telephone (305) 377-1274 Fax (305) 377-1422

August 30, 2004

Division of Corporations  
Annual Reports Section  
Post Office Box 6198  
Tallahassee, Florida 32314

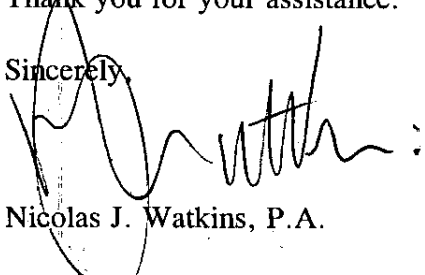
**Re: Gordonstoun, Inc.**  
**2004 Annual Report**

Dear Sir/Madam:

I enclose for filing the 2004 Annual Report of Gordonstoun, Inc., duly completed and signed, together with a check in the amount of \$150.00 in payment of the filing fee. Further, I request that you waive the late fee of \$400.00 pursuant to fact that Gordonstoun, Inc., did not receive notice of the new filing procedures in January, 2004.

Thank you for your assistance.

Sincerely,



Nicolas J. Watkins, P.A.

Enclosures