


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90018 049 ***150.00

DOCUMENT # P03000085188
 1. Entity Name
PLAZA LUXURY DEVELOPMENT GROUP, INC.




Principal Place of Business
3800 SOUTH OCEAN DRIVE
210
HOLLYWOOD, FL 33019

Mailing Address
3800 SOUTH OCEAN DRIVE
210
HOLLYWOOD, FL 33019

24076252

2. Principal Place of Business
3800 S Ocean Dr
 Suite, Apt. #, etc.
210
 City & State
Hollywood Fl
 Zip
33019 Country
USA

3. Mailing Address
3800 S Ocean Dr.
 Suite, Apt. #, etc.
210
 City & State
Hollywood Fl.
 Zip
33019 Country
USA



02032004 Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
WISH, JERRY A
200 SOUTH BISCAYNE BLVD
SUITE 3410
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.

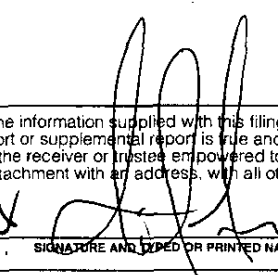
SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FAIRMAN, NEIL 3800 SOUTH OCEAN DRIVE SUITE 210 HOLLYWOOD, FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3800 S Ocean Dr., Ste 210 Hollywood Fl. 33019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GARCIA, ROBERT J 3800 SOUTH OCEAN DRIVE SUITE 210 HOLLYWOOD, FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3800 S Ocean Dr. Ste 210 Hollywood. Fl. 33019
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 receiver or 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 all other like empowered.

SIGNATURE:  **Neil Fairman** 4/27/04 954-630-8880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #