

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000023518

FILED
Apr 21, 2004
Secretary of State

Entity Name: NELSON SLOSBERGAS, P.A.

Current Principal Place of Business:

501 BRICKELL KEY DRIVE
400
MIAMI, FL 33131 US

New Principal Place of Business:

801 BRICKELL AVE.
1580
MIAMI, FL 33131 US

Current Mailing Address:

501 BRICKELL KEY DRIVE
400
MIAMI, FL 33131 US

New Mailing Address:

801 BRICKELL AVE.
1580
MIAMI, FL 33131 US

FEI Number: 65-0398895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NS CORPORATE SERVICES INC.
501 BRICKELL KEY DRIVE
400
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

NS CORPORATE SERVICES INC.
801 BRICKELL AVE.
1580
MIAMI, FL 33131 US

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: _____

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SLOSBERGAS, NELSON
Address: 501 BRICKELL KEY DRIVE, SUITE 400
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SLOSBERGAS, NELSON
Address: 801 BRICKELL AVE., SUITE 1580
City-St-Zip: MIAMI, FL

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: NELSON SLOSBERGAS

D

04/21/2004

Electronic Signature of Signing Officer or Director

Date