


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90045 041 ***150.00

DOCUMENT # P94000061950

1. Entity Name
SOURMINT, INC.



Principal Place of Business
**1940 HARRISON ST
 STE 300
 HOLLYWOOD, FL 33020 US**

Mailing Address
**1940 HARRISON ST
 STE 300
 HOLLYWOOD, FL 33020 US**

20021410



2. Principal Place of Business
1930 HARRISON ST

Suite, Apt. #, etc.
STE 503

City & State
HOLLYWOOD, FL

Zip
33020

Country
US

3. Mailing Address
1930 HARRISON ST.

Suite, Apt. #, etc.
STE 503

City & State
HOLLYWOOD FL

Zip
33020

Country
US

02162005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0514009

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**SOSSIN, ROBERT
 4651 SHERIDAN STREET, SUITE 300
 HOLLYWOOD, FL 33021**

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, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT MINTZ, JERRY 1940 HARRISON ST STE 300 HOLLYWOOD, FL 33020	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MANTIN-SEGAL, DEBORAH 1940 HARRISON ST STE 300 HOLLYWOOD, FL 33020	<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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1930 HARRISON ST, STE 300 HOLLYWOOD, FL 33020	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1930 HARRISON ST, STE 300 HOLLYWOOD, FL 33020	
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 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: JERRY MINTZ **JERRY MINTZ** 3/14/05 **3/14/05** 954-927-4595 **954-927-4595**
Signature and typed or printed name of signing officer or director Date Daytime Phone #