


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90025 007 ***150.00

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| DOCUMENT # P97000028041 | |  | |
| 1. Entity Name CELEBRITY II, INC. | | | |
| Principal Place of Business 10121 SOUTHERN BOULEVARD UNIT 301 ROYAL-PALM-BEACH, FL 33411 | | Mailing Address 10121 SOUTHERN BOULEVARD UNIT 301 ROYAL PALM BEACH, FL- 33411 | |
| 2. Principal Place of Business 17549 BRIDLE LANE Suite, Apt. #, etc. | | 3. Mailing Address 17549 BRIDLE LANE Suite, Apt. #, etc. | |
| City & State JUPITER FL | | City & State JUPITER FL | |
| Zip 33478 | | Zip 33478 | |
| Country USA | | Country USA | |
| 4. FEI Number 65-0745257 | | Applied For Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent JENISON, TERI ANN 10121 SOUTHERN BOULEVARD UNIT 301 ROYAL PALM BEACH, FL 33411 | | 7. Name and Address of New Registered Agent Name JENISON, TERI ANN Street Address (P.O. Box Number is Not Acceptable) 17549 BRIDLE LANE City JUPITER FL Zip Code 33478 | |
| 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 After May 1, 2004 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE D <input type="checkbox"/> Delete | NAME JENISON, TERI ANN | TITLE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | NAME JENISON, TERI ANN |
| STREET ADDRESS 10121 SOUTHERN BOULEVARD, UNIT 301 | CITY-ST-ZIP ROYAL PALM BEACH, FL 33411 | STREET ADDRESS 17549 BRIDLE LANE | CITY-ST-ZIP JUPITER FL 33478 |
| TITLE <input type="checkbox"/> Delete | NAME | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | CITY-ST-ZIP | STREET ADDRESS | CITY-ST-ZIP |
| TITLE <input type="checkbox"/> Delete | NAME | TITLE VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | NAME JENISON, BRADLEY |
| STREET ADDRESS | CITY-ST-ZIP | STREET ADDRESS 17549 BRIDLE LANE | CITY-ST-ZIP JUPITER FL 33478 |
| TITLE <input type="checkbox"/> Delete | NAME | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | CITY-ST-ZIP | STREET ADDRESS | CITY-ST-ZIP |
| TITLE <input type="checkbox"/> Delete | NAME | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | CITY-ST-ZIP | STREET ADDRESS | CITY-ST-ZIP |
| TITLE <input type="checkbox"/> Delete | NAME | TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | NAME |
| STREET ADDRESS | CITY-ST-ZIP | 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: <i>Teri Jenison</i> (Teri Jenison) | | 2/21/04 (561) 744-6632 | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date Daytime Phone # | |