

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000053191

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: PRUDENTIAL BUSINESS GROUP, INC.

**Current Principal Place of Business:**

8060 W. WATERS AVE.  
TAMAP, FL 33615

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1190  
RIVERVIEW, FL 33568

**New Mailing Address:**

FEI Number: 59-3596211      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ABUIMAISH, GHASSAN  
P.O. BOX 1190  
RIVERVIEW, FL 33568      US

**Name and Address of New Registered Agent:**

ABUIMAISH, GUS  
P.O. BOX 1190  
RIVERVIEW, FL 33568      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: G.AA

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: ABUIMAISH, GHASSAN  
Address: 802 W. BLOOMINGDALE AVE.  
City-St-Zip: BRANDON, FL 33511

Title: V      ( ) Delete  
Name: ABUIMAISH, AMJED  
Address: 5259 S. FLORIDA AVE.  
City-St-Zip: LAKELAND, FL 33813

Title: S      ( ) Delete  
Name: ABUIMAISH, FATEN  
Address: 5259 S. FLORIDA AVE.  
City-St-Zip: LAKELAND, FL 33813

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: ABUIMAISH, GUS  
Address: P.O. BOX 1190  
City-St-Zip: RIVERVIEW, FL 33568

Title: V      (X) Change ( ) Addition  
Name: EMAISH, JED  
Address: 5259 S. FLORIDA AVE.  
City-St-Zip: LAKELAND, FL 33813

Title: S      (X) Change ( ) Addition  
Name: EMAISH, GUS  
Address: 5259 S. FLORIDA AVE.  
City-St-Zip: LAKELAND, FL 33813

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: JE

S

04/27/2004

Electronic Signature of Signing Officer or Director

Date