


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90230 050 ***150.00

DOCUMENT # P98000035874

1. Entity Name
CHAMPIONSHIP DANCE INC



Principal Place of Business Mailing Address
704 49TH STREET EAST **704 49TH STREET EAST**
BRADENTON, FL 34208 **BRADENTON, FL 34208**

14010751



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

04222004 Chg-P CR2E034 (10/03)

City & State City & State
 Zip Country Zip Country

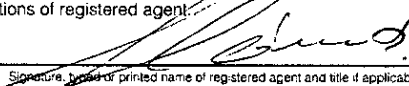
4. FEI Number Applied For
65-0833956 Not Applicable

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

6. Name and Address of Current Registered Agent
GAWRON, MARY
19321 C US HWY 19 N
SUITE 601
CLEARWATER, FL 33764

7. Name and Address of New Registered Agent
 Name **BOGDAN WIENC, President**
 Street Address (P.O. Box Number is Not Acceptable)
704 49TH ST E
 City **BRADENTON** **FL** Zip Code **34208**

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  **BOGDAN WIENC PRESIDENT** DATE **4/23/04**

Signature, typed or printed name of registered agent and title if applicable. (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. **\$5.00 May Be Added to Fees**

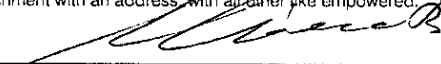
10. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> Delete
NAME	BOGDAN, WIENC
STREET ADDRESS	704 49TH ST E
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	VP <input type="checkbox"/> Delete
NAME	MALGORZATA, WIENC
STREET ADDRESS	704 49TH ST. E
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	add Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOGDAN WIENC
STREET ADDRESS	704 49TH ST E
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	add Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALGORZATA WIENC
STREET ADDRESS	704 49TH ST E
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  DATE **4/23/04** DAYTIME PHONE # **941 748 4269**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

BOGDAN WIENC, President