

2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90193 014 ***150.00

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02242005 Chg-P CR2E034 (10/03)

DOCUMENT # P98000042553			
1. Entity Name DAVID STEWART, INC.			
Principal Place of Business 5810 NE 14TH WAY FORT LAUDERDALE, FL 33334		Mailing Address 5810 NE 14TH WAY - FORT LAUDERDALE, FL 33334	
2. Principal Place of Business 821 Cypress Boulevard		3. Mailing Address 821 Cypress Boulevard	
Suite, Apt. #, etc. #510		Suite, Apt. #, etc. #510	
City & State Pompano Beach, FL		City & State Pompano Beach, FL	
Zip 33069	Country USA	Zip 33069	Country USA
4. FEI Number 65-0834492		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		7. Name and Address of New Registered Agent	
DALEY, STACIE K ESQ 50 NE 26TH AVENUE STE 201 POMPAÑO BEACH, FL 33062		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fess	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ZUCKERMAN, STEWART D 5810 NE 14TH WAY - FORT LAUDERDALE, FL 33334- <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 821 Cypress Boulevard, #510 Pompano Beach, FL 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ZUCKERMAN, PAT B 5810 NE 14TH WAY - FORT LAUDERDALE, FL 33334- <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 821 Cypress Boulevard, #510 Pompano Beach, FL 33069
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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: <u>Stewart D Zuckerman</u>		Date: <u>2/25/05</u>	Daytime Phone #: <u>954-993-4161</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>