

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081368

FILED
Apr 28, 2005
Secretary of State

Entity Name: FOUR SQUARE 24TH STREET, INC.

Current Principal Place of Business:

3389 SHERIDAN STREET
#174
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3389 SHERIDAN STREET
#174
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 65-0948761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EISENBERG, GARY
11640 SW 69TH CT
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

SCHLOSBERG, MINDY
3389 SHERIDAN STREET
#174
HOLLYWOOD, FL 33021 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: MINDY SCHLOSBERG

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ELISEBERG, GARY
Address: 11640 SW 69 CT
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: SCHLOSBERG, MARTIN
Address: 4241 CASPER CT
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARTIN W. SCHLOSBERG

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date