## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P99000094302

1. Entity Name

GOLD COAST WARBIRD ADVENTURES, INC.



Principal Place of Business

12780 HICKORY ROAD NORTH MIAMI, FL 33181 Mailing Address

12780 HICKORY ROAD NORTH MIAMI, FL 33181

## FILED Jul 07, 2004 08:00 AM Secretary of State



05192004

No Cha-P

CR2E034 (10/03)

4. FEI Number 65-0963160 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PLOUCHA, L M C/O ATKINSON, DINER, STONE, ET AL, P.A. 1946 TYLER STREET HOLLYWOOD, FL 33020

## DO NOT WRITE IN THIS SPACE

HOLLYWOOD, FL 33020			IN THIS SPACE		
	named entity submits this statement for the ions of registered agent.	e purpose of changing its register	ed office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_					
JIGINATORIE	Signature, typed or printed name of registered agent and li	itle if applicable. (NOTE. Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$550.00  Due by September 8, 2004  9. Election Campaign Finance Trust Fund Contribution.			cing 🔲	\$5.00 May Be Added to Fees	000000163670 07/07/04-80011-020 550.00
10.	OFFICERS AND DIF	RECTORS	[ <del></del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TIRADO, VINCENT III 12780 HICKORY ROAD NORTH MIAMI, FL 33181				
TITUE NAME STREET ADDRESS CMY~ST~ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME Street Address City-St-Zip					
TITLE Name Street address City-St-Zip			] -···		
TITLE			]		•

12. I hereby certify that the information supplied with this filling 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:** 

STREET ADDRESS

ATHER AND TYPE OR PRINTED MAY OF SIGNING OFFICE OR DISECTOR

JUNE 30, 2004 305-891-2664