


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 8:00 am
Secretary of State

01-15-2004 90007 018 ***150.00

DOCUMENT # 525579	
1. Entity Name MANGROVE DEVELOPMENT CORP.	

Principal Place of Business 3230 S. RIDGEWOOD AVE. SOUTH DAYTONA, FL 32119-3550	Mailing Address 3230 S. RIDGEWOOD AVE. SOUTH DAYTONA, FL 32119-3550
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DO NOT WRITE IN THIS SPACE



01102004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1718268	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**FIANO, VALENTINO R.
3230 S. RIDGEWOOD AVE.
SOUTH DAYTONA, FL 32119**

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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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE P	FIANO, VALENTINO R
NAME	3230 S RIDGEWOOD AVE
STREET ADDRESS	SOUTH DAYTONA, FL 32019
CITY-ST-ZIP	
TITLE VST	FIANO, PAULA E.
NAME	3230 S RIDGEWOOD AVE
STREET ADDRESS	SOUTH DAYTONA, FL 32019
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Paula Fiano V.S.* **1-12-04** **386-760-7669**

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

PAULA FIANO