

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091568

FILED
Apr 26, 2004
Secretary of State

Entity Name: STEPHGAB MANAGEMENT, INC.

Current Principal Place of Business:

7521 SW 92ND COURT
MIAMI, FL 33173 US

New Principal Place of Business:

5151 COLLINS AVE
APT 1021
MIAMI BEACH, FL 33140 US

Current Mailing Address:

7521 SW 92ND COURT
MIAMI, FL 33173 US

New Mailing Address:

5151 COLLINS AVE
APT 1021
MIAMI BEACH, FL 33140 US

FEI Number: 65-0873034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREIRE, SANTIAGO J
7521 SW 92ND COURT
MIAMI, FL 33173

Name and Address of New Registered Agent:

FREIRE, ANA M
5151 COLLINS AVE
APT 1021
MIAMI BEACH, FL 33140

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: ANA FREIRE

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FREIRE, SANTIAGO J
Address: 7521 SW 92ND COURT
City-St-Zip: MIAMI, FL 33173

Title: VPD (X) Delete
Name: FREIRE, ANA MARIA
Address: 7521 SW 92ND COURT
City-St-Zip: MIAMI, FL 33173

Title: T () Delete
Name: FREIRE, GABRIEL J
Address: 7521 S.W. 92 CT
City-St-Zip: MIAMI, FL 33173

Title: S () Delete
Name: FREIRE, STEPHANIE A
Address: 7521 S.W. 92 CT
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FREIRE, ANA M
Address: 5151 COLLINS AVE, APT 1021
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: T (X) Change () Addition
Name: FREIRE, GABRIEL J
Address: 5151 COLLINS AVE, APT 1021
City-St-Zip: MIAMI BEACH, FL 33140

Title: S (X) Change () Addition
Name: FREIRE, STEPHANIE A
Address: 5151 COLLINS AVE, APT 1021
City-St-Zip: MIAMI BEACH, FL 33140

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: ANA FREIRE

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date