

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 210014

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: LOU & GUS, INC.

## Current Principal Place of Business:

11601 BISCAYNE BLVD., SUITE 200C  
MIAMI, FL 33181

## New Principal Place of Business:

## Current Mailing Address:

11601 BISCAYNE BLVD., SUITE 200C  
MIAMI, FL 33181

## New Mailing Address:

FEI Number: 59-0829501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AUGUST, GUS  
11601 BISCAYNE BLVD., SUITE 200C  
N. MIAMI, FL 33181 US

## Name and Address of New Registered Agent:

AUGUST, BRUCE  
11601 BISCAYNE BLVD., SUITE 200C  
N. MIAMI, FL 33181 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: BRUCE AUGUST

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SDM ( ) Delete  
Name: AUGUST, GUS  
Address: 11601 BISCAYNE BLVD., STE. 200C  
City-St-Zip: MIAMI, FL 33181

Title: VD ( ) Delete  
Name: BAUM, TRACI  
Address: 1509 MCFARLANE ROAD  
City-St-Zip: COLVILLE, WA 99114

Title: T ( ) Delete  
Name: AUGUST, LOUISE  
Address: 11601 BISCAYNE BLVD., SUITE 200C  
City-St-Zip: MIAMI, FL 33181

Title: P ( ) Delete  
Name: AUGUST, BRUCE  
Address: 11601 BISCAYNE BLVD., SUITE 200C  
City-St-Zip: MIAMI, FL 33181

Title: D (X) Delete  
Name: MILLER, CELIA  
Address: HC 52, BOX 8517  
City-St-Zip: BIRDCREEK, AK 99540

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: AUGUST, BRUCE  
Address: 11601 BISCAYNE BLVD., STE. 200C  
City-St-Zip: MIAMI, FL 33181

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

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

Title: D (X) Change ( ) Addition  
Name: MILLER, CELIA  
Address: HC 52, BOX 8517  
City-St-Zip: BIRDCREEK, AK 99540

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: BRUCE AUGUST

P

01/06/2004

Electronic Signature of Signing Officer or Director

Date