

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 282378

FILED  
Jan 14, 2004  
Secretary of State

Entity Name: F. D. G. LAUDERDALE, INC.

**Current Principal Place of Business:**

1000 NW 6TH ST  
FT LAUDERDALE, FL 33061 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O IRVING FREDERICK  
500 MERRICK ROAD  
ROCKVILLE CENTRE, NY 11570 US

**New Mailing Address:**

C/O BARBARA GOGLIO  
500 MERRICK ROAD  
ROCKVILLE CENTRE, NY 11570 US

FEI Number: 59-1052520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GOGLIO, BARBARA  
5710 NE 22ND TERRACE  
FT. LAUDERDALE, FL 33308 US

**Name and Address of New Registered Agent:**

SLEBODNIK, DONNA R ESQ.  
1551 FORUM PLACE  
SUITE 200D  
WEST PALM BEACH, FL 33401 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: DONNA R. SLEBODNIK, ESQ.

01/14/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: FREDERICK, BLANCHE  
Address: 695 BIRCHWOOD DR.  
City-St-Zip: WESTBURY, NY

Title: SD ( ) Delete  
Name: GOGLIO, ESTHER M.,  
Address: 3500 GALT OCEAN DR.  
City-St-Zip: FT. LAUDERDALE, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FREDERICK, BLANCHE  
Address: 695 BIRCHWOOD DR.  
City-St-Zip: WESTBURY, NY

Title: SD (X) Change ( ) Addition  
Name: GOGLIO, ESTHER M  
Address: 3500 GALT OCEAN DR.  
City-St-Zip: FT. LAUDERDALE, FL

Title: TD ( ) Change (X) Addition  
Name: GOGLIO, BARBARA  
Address: 500 MERRICK ROAD  
City-St-Zip: ROCKVILLE CENTRE, NY 11570 US

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: ESTHER M. GOGLIO

SD

01/14/2004

Electronic Signature of Signing Officer or Director

Date