

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 302526

FILED
Apr 24, 2004
Secretary of State

Entity Name: AMILED A CORPORATION

Current Principal Place of Business:

GARDENS STRIDE RITE
3101 PGA BLVD. #F137
PALM BCH. GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

GARDENS STRIDE RITE
3101 PGA BLVD. #F137
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 59-1196153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFERY FRISHMAN
3101 PGA BLVD., #F-137
GARDENS STRIDE RITE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRISCHMAN, JEFFREY,
Address: 3101 PGA BLVD., #F-137
City-St-Zip: PALM BEACH GARDENS, FL

Title: VP () Delete
Name: ROZEN, BERNARDO
Address: 19041 SE OUTRIGGER LANE
City-St-Zip: JUPITER, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BERNARDO ROZEN

VP

04/24/2004

Electronic Signature of Signing Officer or Director

_____ Date