2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

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DOCUMENT # 389677

 Entity Name PUMPERNIK'S OF HALLANDALE, INC.



Principal Place of Business

1351 SW 141 AVENUE APARTMENT 114 PEMBROKE PINES, FL 33027 Mailing Address

1351 SW 141 AVENUE APARTMENT 114

PEMBROKE PINES, FL 33027

FILED Mar 05, 2004 08:00 AM Secretary of State



02252004

No Chg-P --- CR2E034 (10/03)

4. FEI Number 59-1366526 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, DAVID 3000 N. UNIVERSITY DR, SUITE E CORAL SPRINGS, FL 33065

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the obligations of registered agent.				
SIGNATURE	V applicable (NOTE, Registered Agent signatu	ire 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.	\$5.00 May Be Added to Fees	U00000077403 03/05/04-80041-010 150.00	

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

OFFICERS AND DIRECTORS 10. TITLE BROWN, AARON MARKE STREET ADDRESS 7552 NW 71 TERRACE PARKLAND, FL 33067 CXTY - SX - 23P TITLE NAME STREET ADDRESS CITY - ST - ZIP BILE MANAF STREET ADDRESS CITY - ST - 7/P NAME STREET ADDRESS CITY-ST-Z3P NAME STREET ADDRESS CITY - ST-789 RTLE NAME STREET ADDRESS D3TY - \$3 - 23P

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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 charged, or on an attacherent with an address, with all other like empowered.

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR