

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # 470770**

1. Entity Name  
**INDUSTRIAL PROMOTIONS INTERNATIONAL, INC.**



Principal Place of Business  
**8423 NW 74ST  
MIAMI, FL 33166 US**

Mailing Address  
**P.O. BOX 520343  
MIAMI, FL 33166 US**

**FILED**  
**Apr 29, 2004 08:00 AM**  
**Secretary of State**



04262004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-1580147**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**LAVIN, MICHAEL G.  
103 SANTANDER  
CORAL GABLES, FL 33134**

**DO NOT WRITE  
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE

*Michael G. Lavin*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**4-26-04**  
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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	LAVIN, EMILIA A
STREET ADDRESS	1730 FERDINAND
CITY-ST-ZIP	CORAL GABLES, FL
TITLE	SD
NAME	LAVIN, RAMON
STREET ADDRESS	1730 FERDINAND
CITY-ST-ZIP	CORAL GABLES, FL
TITLE	DV
NAME	LAVIN, MICHAEL G.
STREET ADDRESS	103 SANTANDER
CITY-ST-ZIP	CORAL GABLES, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000140699  
04/29/04-80171-018 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other title empowered.

**SIGNATURE:**

*Emilia A. Lavin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**APR 26/04**  
Date

**(305) 266-4868**  
Daytime Phone #