2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 549005

Entity Name
 RICHARD A. LANDAU, INC.

FILED
May 03, 2004 08:00 AM
Secretary of State

Principal Place of Business

410 E. HALLANDALE BEACH BLVD. SUITE 202

SUITE 202 HALLANDALE, FL 33009

SIGNATURE: 1

Mailing Address

410 E. HALLANDALE BEACH BLVD.

SUITE 202 HALLANDALE, FL 33009



DO NOT WRITE IN THIS SPACE

04302004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For

5. Certificate of Status Desired

59-1771129

Not Applicable
\$8.75 Additional

Fee Required

6.	Name	and	Addres	s of	Current	Registe	ered Ag	ent

LANDAU, RICHARD A. 410 E. HALLANDALE BEACH BLVD., SUITE 202 HALLANDALE, FL 33009

DO NOT WRITE IN THIS SPACE

9.54.728 Date

	named entity submits this statement for the plans of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or b	oth, in the State of Florida. I am famillar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	Agent signature	erequired when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	 Election Campaign Finanting Trust Fund Contribution. 	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LANDAU, RICHARD A. 410 HALLENDALE BEACH BLVD. ,SL HALLANDALE, FL 33009	JITE202		···			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·	U00000151256 05/04/04-80038-012 150.00		
TITLE NAME STREET ADORESS CITY-ST-ZIP				DC	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY ST. 719							

12. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR