


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

**Apr 26, 2004 08:00 AM
Secretary of State**

DOCUMENT # 573614
1. Entity Name
NIABCO - FLORIDA, INC.



Principal Place of Business: 2161 GULF OF MEXICO DR. LONGBOAT KEY, FL 34228
Mailing Address: 5-3865 TAYLOR RD ORCHARD PARK, NY 14127 US



01152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 16-1119575 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MARTIN, WARNER G
2161 GULF OF MEXICO DR., #2
LONGBOAT KEY, FL 34228

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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: _____ (NOTE: Registered Agent signature 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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTIN, WARNER G 2161 GULF OF MEXICO DR., #2 LONGBOAT KEY, FL 34228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, KEVIN P 7225 TRICIA LANE BOSTON, NY 14025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARTIN, SHIRLEY J 2161 GULF OF MEXICO DR., #2 LONGBOAT KEY, FL 34228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/26/04-80059-019 150.00

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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 changed, or on an attachment with an address, with all other lists empowered

SIGNATURE:  DATE: 1-29-04 DAYTIME PHONE #