2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 23, 2004 8:00 am Secretary of State

1. Entity Nam	MENT # 573674 olle, inc.					09-23-2	2004 9000:	2 027 **	*550.00
Principal Place 19355 TURN #26 GR AVENTURA, F	BERRY WAY FL 33180 US	Mailing Address 19355 TURBERRY WA #26 GR AVENTURA, FL 3318				10131 JURI 1811 ION 11			
3000	lace of Business /SAAW) BAUD	AN)	320)					 11 11 	
	2802	Suite, Apt. #, etc.	يد_		09012004	Chg-P	CR2E03	4 (10/03)	
City & State	ENTURA FI.	AVENTURA	7	Fh.	4. FEI Number 86-032				plied For t Applicable
^{Zip} 33,	160 Country S.A.	zip 33160	Coun	ITY U.S.A.	5. Certificate	of Status Desired		8.75 Add ee Required	
	6. Name and Address of Curre	ent Registered Agent		Name .	7. Name and	Address of New	Registered A	gent	
STOLLE, F		Street Address (P.O. Box Number is Not Acceptable)							
19355 TUF #26 GR	RNBERRY WAY		ಕಿಂಡ	in 1521	fixy ガル				
AVENTUR	A, FL 33180		#28	62					
				City AVE	WTURA		FL	Zip Cod	33160
	named entity submits this statementions of registered agent.	for the purpose of changing it	ts register	ed office or register	red agent, or bo	th, in the State of F	lorida. I am fa	ımiliar with,	and accept
SIGNATURE	Signature, types or printed name of registered a	gent and file if applicable. (NC	OTE: Registere	od Agent signature required	d when reinstating)		DATE 6	7/20/	04
4	LE NOW!!! FEE IS \$550.00 ue by September 8, 2004	9. Election Camp Trust Fund Co	_		.00 May Be led to Fees		······· <i>)</i>	7	, -
10.		ND DIRECTORS	11.			CHANGES TO OF	FICERS AND I	DIRECTORS	5 JN 11
TITLE NAME	P STOLLE, FRED	. Delete	TITL NAM	1 1	-	STOLLE		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	19355 TURNBERRY WAY #2 AVENTURA, FL	6 GR	STR		3000 /S. AUENT	LAND BZ	10 A	2802	
TITLE		. Delete	TITL	Y				Change	Addition
STREET ADDRESS CITY-ST-ZIP				eet address '-st-zip					
TITLE		☐ Delete	TITL					Change	Addition
NAME STREET ADDRESS			AAN .						
CITY-ST-ZIP				EET ADDRESS (~ST-ZIP					
TITLE-	د د د درموهن مجيري ده د در و د درد	Delete -			هندره و در عبد	المام خصيد المناب المالية	جازاته ليهجيون	- Change	* Addition *
NAME STREET ADDRESS			NAM STR	AE EET ADDRESS					<u> </u>
CITY-ST-ZIP			CITY	(-ST-ZIP	<u></u>	<u>-</u>			
TITLE NAME		☐ Delele	TITL NAA	I				☐ Change	Addition
STREET ADDRESS			STR	EET ADORESS					-
TITLE		☐ Delete	CITY	/-ST-21P				☐ Change	Addition
NAME		☐ Detets	NAN	I				Change	☐ Abdition
STREET ADDRESS CITY-ST-ZIP				EET ADORESS /- ST-ZIP					
12. I hereby indicated of the columns	certify that the information supplied on this report or supplemental report or supplemental report or trustee A , or on an attachment with an age of	with this filing does not qualify it is true and accurate and that improvered to execute this repo	for the exe t my signa ort as requ	emption stated in Seture shall have the ired by Chapter 60	ection 119.07(3) same legal effe 7, Florida Statut	(i), Florida Statutes ct as if made unde es; and that my na	. I further certi r oath; that I ar me appears in	fy that the in n an officer Block 10 or	nformation or director Block 11 if
•	X_{k}	A Hall			Ö	Mark	300	-022	2101
SIGNAT		OB-PRINTED NAME OF SIGNING OFFICE	R OR DIREC	тоя		100/04	200	グラス vtirre Phone #	2196



September 20, 2004

Division of Corporations P.O.Box 1500 Tallahassee FL 32302-1500

We are hereby requesting a waiver of the \$400 late fee since we did not receive notice of the annual report being due by May 1, pursuant to 607.193(1)(b) Florida Statutes.

Sincerely,

Fred Stolle President

1427 6

P.S. Original delivered to old address.

Tales

3000 ISLAND BLUD #2802 AVENTURA FZ 33160 19355 Turnberry Way, #26 GR. Aventura, Florida 33180