## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **FILED** Jan 08, 2004 08:00 AM — Secretary of State

DOCUMENT	#	681	680
1. Entity Name			

Principal Place of Business

Mailing Address

151 CRANDON BLV 143

CAFIN CORP.

151 CRANDON BLV

KEY BISCAYNE, FL 33149

KEY BISCAYNE, FL 33149



01062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2070770

Applied For Not Applicable

5. Certificate of Status Desired.

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

GOLDSTEIN, KATTIA 610 CURTISWOOD DR

## DO NOT WRITE

KEY BISC/	NE, FL 33149			IN THIS SPACE		
	named entity submits this statement for the $\rho$ ions of registered agent.	urpose of changing its registered	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and life	Papplicable (NOTE Registered	Agent signatun	s regulated when reinstating)	DAYE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	<ol> <li>Election Campaign Finance Trust Fund Contribution.</li> </ol>	îngi 🗆	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY - ST - EXP	DPST MCGREGOR, ELIZABETH 151 CRANDON BLVD.,#143 KEY BISCAYNE, FL 33149				U09000000790 U1/09/ <b>04-00</b> 012-012 <b>158.75</b>	
TITLE NAME STREET ADDRESS CRY+ST-ZIP			no considerant describe de Artic	- Walter Company		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<del></del>	IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated	certify that the information supplied with this f on this report or supplemental report is true	iling does not qualify for the exemend accurate and that my signate	ption state	ed in Section 119.07(3) we the same legal effe	(i), Florida Statutes. I further certify that the information ct as if made under eath; that I am an officer or director	

induction on this report is supplemental report a que and accurate and distribution 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 like empowered.