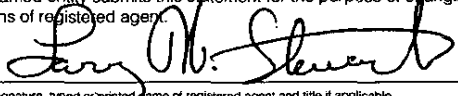
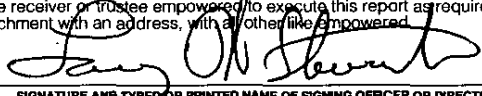


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2004 8:00 am
Secretary of State

01-14-2004 90003 038 ****61.25

DOCUMENT # 719099 1. Entity Name LOCAL 32 HOLDING CORPORATION, INC.					
Principal Place of Business 20375 NE 15TH COURT NORTH MIAMI BEACH, FL 33179			Mailing Address 20375 NE 15TH COURT NORTH MIAMI BEACH, FL 33179		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2131186	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
STEWART, LARRY 7891 NW 12 ST PEMBROKE PINES, FL 33024				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				DATE 1/10/04	
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.		
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	STEWART, LARRY		NAME		
STREET ADDRESS	7891 NW 12TH STRET		STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES, FL		CITY-ST-ZIP		
TITLE	VD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GIORDANO, PAUL		NAME		
STREET ADDRESS	2160 NOVA VILLAGE DR		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33317		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	BENNETT, EDWARD		NAME		
STREET ADDRESS	5906 FARRAGUT ST		STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD, FL 33021		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	CRAVEY, JOHN		NAME	VILLARUEL, Daniel	
STREET ADDRESS	1238 NW 125TH TERR		STREET ADDRESS	111 NW 54 St.	
CITY-ST-ZIP	SUNRISE, FL		CITY-ST-ZIP	Ft. Laud. FL 33309	
TITLE	STD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	STATLER, SCOTT		NAME		
STREET ADDRESS	12218 SW 52 PL		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33330		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a other like empowered.					
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE 1/10/04 DAYTIME PHONE # 305 651-5971		