


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 09, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F00000002576</b>	
1. Entity Name TOURNEAU EXPRESS, INC.	

Principal Place of Business 3 EAST 54TH STREET NEW YORK, NY 10022	Mailing Address 3 EAST 54TH STREET NEW YORK, NY 10022
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  NATIONAL CORPORATE RESEARCH, LTD., INC. 103 N. MERIDIAN STREET TALLAHASSEE, FL 32301-0000	<b>DO NOT WRITE IN THIS SPACE</b>
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7. 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD WEXLER, ROBERT J 131 LEXINGTON AVENUE NEW YORK, NY 10016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST WEXLER, DAVID 3 EAST 54TH STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRISHWASSER, DANIEL 52 PADDINGTON ROAD SCARSDALE, NY 10583
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SALTZ, FRAN 6 MINDY COURT LATTINGTOWN, NY 11560
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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07/09/04-20017-011 150.00

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 like empowered.

<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Robert Wexler 7/6/04 212 758 6022 <small>Date Daytime Phone #</small>
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