

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006059

FILED
Jul 01, 2004
Secretary of State

Entity Name: POLYVINE INCORPORATED

Current Principal Place of Business:

500 PALM ST., #22
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

500 PALM ST., #22
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 95-4691380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEINHORN, BARRY
651 OKEECHOBEE BLVD., APT 801
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: WELLS, PETER
Address: 27825 AVENUE HOPKINS, UNIT 1
City-St-Zip: VALENCIA, CA 91355

Title: VD () Delete
Name: STEINHORN, BARRY
Address: 27825 AVENUE HOPKINS, UNIT 1
City-St-Zip: VALENCIA, CA 91355

Title: STVC () Delete
Name: WELLS, ANNE
Address: 27825 AVENUE HOPKINS, UNIT 1
City-St-Zip: VALENCIA, CA 91355

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY STEINHORN

VD

07/01/2004

Electronic Signature of Signing Officer or Director

Date