

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003380

FILED
Jan 05, 2004
Secretary of State

Entity Name: VENGROFF, WILLIAMS & ASSOCIATES INTERNATIONAL, INC.

Current Principal Place of Business:

SUITE 101
203 NE FRONT STREET
MILFORD, DE 34237

New Principal Place of Business:

Current Mailing Address:

2211 FRUITVILLE RD.
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 84-1620502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENGROFF, HARVEY
2211 FRUITVILLE RD.
SARASOTA, FL 34237 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: PD () Delete
Name: VENGROFF, MARK
Address: 1 CAVALIERI DRIVE
City-St-Zip: NEWPORT COAST, CA 92646

Title: DV () Delete
Name: VENGROFF, JOEL VP
Address: 1 BANKSIDE DRIVE
City-St-Zip: CENTERPORT, NY 11721

Title: SD () Delete
Name: VENGROFF, KRISTY
Address: 255 WOODBINE AVE.
City-St-Zip: NORTHPORT, NY 11768

Title: TCFO () Delete
Name: WILLIAMS, ROBERT
Address: 3615 HIDDEN RIVER RD.
City-St-Zip: SARASOTA, FL 34240

Title: COB () Delete
Name: VENGROFF, HARVEY
Address: 5135 RIVERWOOD AVE.
City-St-Zip: SARASOTA, FL 34231

Title: CTO () Delete
Name: TOREK, GABE
Address: 14 ARROWOOD DR.
City-St-Zip: ST. JAMES, NY 11780

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:

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: HARVEY VENGROFF

COB

01/05/2004

Electronic Signature of Signing Officer or Director

Date