## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 20, 2004 8:00 am Secretary of State 04-20-2004 90024 017 \*\*\*150.00

DOCUMENT # F11228  1. Entity Name GREEN PLACE INTERNATIONAL, INC.			ļ			01202001	700 <b>2</b> 1017	150.00
Principal Place of Business C/O B.V. MAZZEO& CO., CPA'S 13501 SW 128 ST., STE 103 MIAMI, FL 33186 US		Mailing Address C/O B.V. MAZZEO& CO., CPA'S 13501 SW 128 ST., STE 103 MJAMJ, FL 33186 US		1 1941/17 (4	24049234			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04152004	Chg-P	CR2E034 (	10/03)
City & State		City & State		4. FEI Numb 59-206			Applied For Not Applicable	
Zip	Country	Zip	Count	ry	5. Certificate	of Status Desired		<b>75</b> Additional Required
	6. Name and Address of Current	Registered Agent		Name	7. Name and	d Address of New R	tegistered Agen	it
OPPENHEIM, STEVEN 800 BRICKELL AVE., <del>STE 1115</del>				Street Address (P.O. Box Number is Not Acceptable)				
	•		Ī	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 renstating)  DATE								
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees								
10. TITLE	OFFICERS AND	DIRECTORS Delete	11. TITLE		ADDITIONS	/CHANGES TO OFF		IECTORS IN 11 Change
name Street address City-St-Zip	RIBA, ANTONIO 8900 SW 117 AVENUE, 8104 MIAMI, FL 33186	LL DVIIIO	NAME STREE	. (	3501 9u	U /28 9		Col
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD RIBA, RAMON 8900 SW 117 AVE, B104 MIAMI, FL 33186	☐ Delete		: Ì	35015	1128 ST		Change Addition
TITLE	AS	☐ Delete	TITLE		WI ROULLY	16.32	<u>~~</u> ∀	Change Addition
NAME Street Address City-St-Zip	OPPENHEIM, STEVEN 800 BRICKELL AVE, <del>STE 1115</del> MIAMI, FL 33131			ET ADDRESS -ST-ZIP	80-013RICK	CELL AVE	E, STE	707
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1				Change Addition
TITLE NAME STREET ADDRESS CITY~ST~ZIP		☐ Delete		1				Change [ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		í			, 🗆	Change Addition
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 provided 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 attactment with an address, 15th a other like empowered.  SIGNATURE:  OF DEVALUES.								
SIGNAL	UHE:	¥1 II			SUME /	<u> </u>		7/10/17