## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F54269

Entity Name: AMIT - POMPANO, INC.

FILED Mar 17, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
COA FOLINTON AVE. FACT	224 FOLINITONI AVE. FACT

234 EGLINTON AVE., EAST
SUITE 418
TORONTO,, ON M4P 1K5 CA
234 EGLINTON AVE., EAST
SUITE 418
TORONTO, ON M4P 1K5 CA
TORONTO, ON M4P 1K5 CN

Current Mailing Address: New Mailing Address:

234 EGLINTON AVE., EAST SUITE 418 TORONTO, ONT., CANADA, ON M4P 1K5 CA
234 EGLINTON AVE., EAST SUITE 418 TORONTO, ON M4P 1K5 CA
TORONTO, ON M4P 1K5 CA

FEI Number: 98-0056569 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KLEIN, SHAMIRA C/O BERMAN RENNERT VOGEL & MANDLER, P.A. 100 SOUTHEAST 2ND STREET, SUITE 2900 MIAMI, FL 33131

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KLEIN, HAIM
 Name:

 Address:
 234 EGLINTON AVE., EAST, SUITE 418
 Address:

 City-St-Zip:
 TORONTO, ON M4P 1K5 CN
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KLEIN, SHAMIRA
 Name:

 Address:
 5835 N. BAY ROAD
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 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: SHAMIRA KLEIN VP 03/17/2004