2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F80194

1. Entity Name

AL SIEFERT ENTERPRISES INC.



FILED
Jan 22, 2004 08:00 AM
Secretary of State

Principal Place of Business

% AL SIEFERT 4797 NE 11 AVE.

OAKLAND PARK, FL 33334 US

Mailing Address

% AL SIEFERT 2319 S.E. 10TH STREET POMPANO BEACH, FL 33062

US



DO NOT WRITE IN THIS SPACE

01162004 No Chg-P CR2E034 (10/03)

Applied For Not Applicable

59-2189155

5. Certificate of Status Desired

4. FEI Number

\$8.75 Additional

6. Name and Address of Current Registered Agent

SIEFERT, AL 2319 S.E. 10TH STREET POMPANO BEACH, FL 33062

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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 reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		 Election Campaign Finance Trust Fund Contribution. 	ing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST SIEFERT, AL 2319 S.E. 10TH STREET POMPANO BEACH, FL 33062				HODODOLOGO
Title Name Street address City-St-Zip					U00000010297 01/22/04-80026-004 150.00
TITLE NAME STREET ADDRESS CATY-ST-ZIP	_			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CHY-ST-ZIP					
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.					