

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 09, 2004 8:00 am**  
**Secretary of State**

03-09-2004 90050 046 \*\*\*150.00

**DOCUMENT # F99000003285**

1. Entity Name  
**CONCORD KEYSTONE SALES CORP.**



Principal Place of Business  
**4000 HOLLYWOOD BLVD.  
SUITE 650 N  
HOLLYWOOD, FL 33021**

Mailing Address  
**4000 HOLLYWOOD BLVD.  
SUITE 650 N  
HOLLYWOOD, FL 33021**

**94026755**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02182004

Chg-P

CR2E034 (10/03)

4. FEI Number

**22-3130653**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

|                |                      |                                 |
|----------------|----------------------|---------------------------------|
| TITLE          | CP                   | <input type="checkbox"/> Delete |
| NAME           | LAMPERT, IRA B       |                                 |
| STREET ADDRESS | 4000 HOLLYWOOD BLVD. |                                 |
| CITY-ST-ZIP    | HOLLYWOOD, FL 33021  |                                 |
| TITLE          | SVPS                 | <input type="checkbox"/> Delete |
| NAME           | KING, BRIAN F        |                                 |
| STREET ADDRESS | 4000 HOLLYWOOD BLVD. |                                 |
| CITY-ST-ZIP    | HOLLYWOOD, FL 33021  |                                 |
| TITLE          | VPT                  | <input type="checkbox"/> Delete |
| NAME           | PRESS, HARLAN I      |                                 |
| STREET ADDRESS | 4000 HOLLYWOOD BLVD. |                                 |
| CITY-ST-ZIP    | HOLLYWOOD, FL 33021  |                                 |
| TITLE          | AS                   | <input type="checkbox"/> Delete |
| NAME           | PRESS, HARLAN I      |                                 |
| STREET ADDRESS | 4000 HOLLYWOOD BLVD  |                                 |
| CITY-ST-ZIP    | HOLLYWOOD, FL 33021  |                                 |
| TITLE          | EVP                  | <input type="checkbox"/> Delete |
| NAME           | LAMPERT, KEITH       |                                 |
| STREET ADDRESS | 4000 HOLLYWOOD BLVD. |                                 |
| CITY-ST-ZIP    | HOLLYWOOD, FL 33021  |                                 |
| TITLE          | SVP                  | <input type="checkbox"/> Delete |
| NAME           | FINKBEINER, RICHARD  |                                 |
| STREET ADDRESS | 4000 HOLLYWOOD BLVD. |                                 |
| CITY-ST-ZIP    | HOLLYWOOD, FL 33021  |                                 |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |                          |  |
|----------------|--------------------------|--|
| TITLE          | AS                       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Alan Schutzman           |  |
| STREET ADDRESS | 4000 Hollywood Blvd.     |  |
| CITY-ST-ZIP    | Hollywood, Florida 33021 |  |
| TITLE          | VP                       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | David Ward               |  |
| STREET ADDRESS | 4000 Hollywood Blvd.     |  |
| CITY-ST-ZIP    | Hollywood, Florida 33021 |  |
| TITLE          | SVP                      | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | URS Stampfli             |  |
| STREET ADDRESS | 4000 Hollywood Blvd.     |  |
| CITY-ST-ZIP    | Hollywood, Florida 33021 |  |
| TITLE          |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                          |  |
| STREET ADDRESS |                          |  |
| CITY-ST-ZIP    |                          |  |
| TITLE          |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                          |  |
| STREET ADDRESS |                          |  |
| CITY-ST-ZIP    |                          |  |
| TITLE          |                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                          |  |
| STREET ADDRESS |                          |  |
| CITY-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.

SIGNATURE: Alan Schutzman **ALAN SCHUTZMAN**

2/18/04

954-331-4285

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #