


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG -5 PM 12: 06

DOCUMENT # F99000003762			
1. Entity Name PLAY ALONG, INC.			
Principal Place of Business 455 FAIRWAY DRIVE SUITE 300 DEERFIELD BEACH, FL 33441		Mailing Address 455 FAIRWAY DRIVE SUITE 300 DEERFIELD BEACH, FL 33441	
2. Principal Place of Business 800 Fairway Drive		3. Mailing Address 800 Fairway Drive	
Suite, Apt. #, etc. Suite 295		Suite, Apt. #, etc. Suite 295	
City & State Deerfield Beach, FL		City & State Deerfield Beach, FL	
Zip 33441	Country USA	Zip 33441	Country USA
6. Name and Address of Current Registered Agent GELLER, LAWRENCE 18566 HARBOR LIGHT WAY BOCA RATON, FL 33498		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GELLER, STEVE 17212 WHITEHAVEN DRIVE BOCA RATON, FL 33498 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300039904489
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAI KING, KONG 1/F BLOCK A, CHUNG MEI CENTRE, NO. 15 HONG KONG, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUI YING, TAM 1/F BLOCK A, CHUNG MEI CENTRE, NO. 15 HONG KONG, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FOREMAN, JAY 428 PLAZA REAL UNIT 510 BOCA RATON, FL 33432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P Foreman, Jay 898 Lilac Drive Boca Raton, FL 33487 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V EMBY, CHARLES 1857 OCEAN MIST DRIVE BOCA RATON, FL 33498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP Emby, Charles 7303 Ballantrae Court Boca Raton, FL 33496 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GELLER, LAWRENCE 1857 OCEAN MIST DRIVE BOCA RATON, FL 33498 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	/VP/S/T Geller, Lawrence 3730 NE 24th Avenue Lighthouse Point, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 7/21/04 Daytime Phone # 954 596 2210	

LAWRENCE GELLER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 834479 4304524

AUTHORIZATION :

Patricia Pizeto

COST LIMIT : \$ 550.00

ORDER DATE : August 4, 2004

ORDER TIME : 10:21 AM

ORDER NO. : 834479-005

PLEASE FILE 1ST**

CUSTOMER NO: 4304524

CUSTOMER: Ms Rebecca Ambriz
Sonnenschein Nath & Rosenthal
8000 Sears Tower
233 South Wacker Drive
Chicago, IL 60606

ANNUAL REPORT FILING

NAME: PLAY ALONG, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 2956

EXAMINER'S INITIALS: _____

RECEIVED
04 AUG -5 AM 10:55
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA