

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G10319

FILED
Jan 21, 2004
Secretary of State

Entity Name: THE PLAZA AT JAMES, INC.

Current Principal Place of Business:

1745 JAMES AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

% ABRAHAM A. GALBUT, ESQ.
999 WASHINGTON AVENUE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-2232679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALBUT, ABRAHAM A., ESQ.
999 WASHINGTON AVENUE
MIAMI BEACH, FL 33139

Name and Address of New Registered Agent:

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:

Title: VTD () Delete
Name: GALBUT, RUSSELL W.,
Address: 555 NE 15 ST
City-St-Zip: MIAMI, FL 33132

Title: PSD () Delete
Name: GOLBET, ABRAHAM A
Address: 999 WASHINGTON AVE.
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PSD (X) Change () Addition
Name: GALBUT, ABRAHAM A
Address: 999 WASHINGTON AVE.
City-St-Zip: MIAMI BEACH, FL 33139

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: ABRAHAM A. GALBUT

PSD

01/21/2004

Electronic Signature of Signing Officer or Director

Date