2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G78178						-			
1. Entity Name FILINGS, INC.					FILED				
1 12.11100,						O/ HAV	/ 5		
				GO WE IT	04 MAY -5 PM 12: 08				
Principal Place of Business Mailing Address						SECRET	ARY OF STAT	F	
The state of the s						TALLAHA	ARY OF STATA ASSEE, FLORIC	ĬΛ	
							818): EIEH BIBII BIBI	611861 () (mms	
2. Principat Place of Business									
				ne.			YINZI MIĞIL MINIL MINIL MIĞİL DIL	DITER II IEMI	
Suite, Apt. #, etc. Suite, Apt. #, etc.					05042004				
Ety & State City & State					4. FEI Number 59-2517007			pplied For lot Applicable	
-ZP- 2	Country	Zìp	Zip Country		5. Certificate of Status Desired S8.		_ \$8.75 Act		
333	11 054				<u> </u>		Fee Require	ed	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
HEYMAN, L				Street Address	Street Address (P.O. Box Number is Not Acceptable)				
3732 N.W. 16TH ST. FT. LAUDERDALE, FL 33311				Street Address (F.O. Box Number is Not Acceptable)					
,									
<u> </u>				City			FL Zip Coo	et	
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 obligat	ions of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered agent and titl	e if applicable (NOT	F: Registered	Agent signature require	d when reinstation)		DATE	 -	
	Signature (good of particular and pa							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
!	LE NOW!!! FEE IS \$550.00	cing \$5	.00 May Be	9 2					
Due by September 8, 2004 Trust Fund Contribution.								 	
10.	OFFICERS AND DIRE		11.		ADDITIONS,	CHANGES O OFFIC	CERS AND DIRECTOR Change	RS IN 11	
NAME	DP (Delete HEYMAN, LESLIE		NAME				_ ,	_	
STREET ADDRESS	3732 N.W. 16TH ST.			T ADDRESS		000360)67004 010 **150		
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311 V		TITLE	ST-ZIP	<u>U5/1.</u>	1/0401018	U_U ##15U ☐ Change	Addition	
TITLE NAME	HAYDEN ROBERT	= 55.000					☐ Change	Aggiggii	
STREET ADDRESS	3732 NW 16TH ST.			ET ADDRESS					
CITY-ST-ZIP	FL. LAUDERDALE, FL. 33311			ST-ZIP					
TITLE NAME			TITLE				☐ Change	☐ Addition	
STREET ADDRESS	: "			T ADDRESS					
CITY-ST-ZIP	7 0111 10 10 10 10 10 10 11		CITY-	ST-ZIP				<u>,</u>	
TITLE NAME	VP ROMAN, TERESA	☐ Delete	TITLE	i i			☐ Change	Addition	
STREET ADDRESS	3732 NW 16TH ST.			T ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311		CITY-	ST-ZIP			<u> </u>		
TITLE	V BROWN, BRENDA	☐ Delete	TITLE NAME	1			Change	Addition	
NAME STREET ADDRESS	3732 NW 16TH ST	· · · · - · · ·		T ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311		CITY-	ST-ZIP					
TITLE		☐ Delete	TITLE	ì			☐ Change	☐ Addition	
NAME STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP				ST-ZIP					
12. I hereby indicated	certify that the information supplied with this to this report or supplemental report is true	filling does not qualify fo	r the exer my signati	mption stated in S ure shall have the	ection 119.07(3) same legal effe	(i), Florida Statutes. I ct as if mage under o	further certify that the path; that I am an office	information or director	
12. I hereby certify that the information supplied with this filling 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 in flue 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.									
			1 /	hull		6/3/04	95479	12/00	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #									
L									