2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2004 08:00 AM Secretary of State

DOCUMENT # 0 1. Entity Name WARM DANISH, INC.	387874 	
Principal Place of Business	Mailing Addr	ess
115 NE 6TH AVE	115 NE 6TI	
DELRAY BEACH, FL 33483	US DELRAY BE	ACH, FL 33483 US

SIGNATURE

No Chg-P CR2E034 (10/03) 02202004 DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 59-2358761 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LAMCHICK, BRUCE DO NOT WRITE 9130 S DADELAND BLVD 1101 IN THIS SPACE MIAMI, FL 33156 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) Committee of the second U00000078396 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 03/08/04-80025-005 150.00 OFFICERS AND DIRECTORS 10. DP TITLE JOHANSEN, FLEMING NAME STREET ADDRESS 4520 S BARWICK RANCH CIR DELRAY BEACH, FL 33445 CITY-ST-ZIP DST TITLE LAMCHICK, RANDY 4779 ORCHARD LN STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33445 TITI F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this illing does not qualify for the exemption stated in Section 119.07(3)(1), 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 cath; 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.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR