

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90056 013 ***150.00

DOCUMENT # H95213 1. Entity Name 1212 CORP.					
Principal Place of Business 1212 E BROWARD BLVD. C/O MARTIN SILVERSTEIN FT LAUDERDALE FL 33301			Mailing Address 1212 E BROWARD BLVD. C/O MARTIN SILVERSTEIN FT LAUDERDALE FL 33301		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 1621 SE 8 th Street Suite, Apt. #, etc.			
City & State		City & State Fort Lauderdale, FL		4. FEI Number 65-0032288	
Zip 33316		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SILVERSTEIN, MARTIN B. 1212 E BROWARD BLVD. FT LAUDERDALE FL 33301				7. Name and Address of New Registered Agent Name Martin B Silverstein Street Address (P.O. Box Number is Not Acceptable) 1621 SE 8 th Street City Fort Lauderdale FL Zip Code 33316	
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.</small>		Martin B Silverstein <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State		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	DPS SILVERSTEIN, MARTIN B. 1212 E BROWARD BLVD. FT LAUDERDALE FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 1621 SE 8 th Street Fort Lauderdale, FL 33316	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SILVERSTEIN, MARTIN B. 1212 E BROWARD BLVD. FT LAUDERDALE FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 1621 SE 8 th Street Fort Lauderdale, FL 33316	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVERSTEIN, MOLLY A. 1212 E BROWARD BLVD. FT LAUDERDALE FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete 5599 Porto Fino Drive Boca Raton, FL 33433	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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	<input 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	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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>		Martin B Silverstein 2-20-04 <small>Date Daytime Phone #</small>			