2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K13254

Entity Name: GATOR SIXTH AVE., INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1595 NE 163RD STREET

NORTH MIAMI BEACH, FL 33162 US

Current Mailing Address: New Mailing Address:

1595 NE 163RD STREET

NORTH MIAMI BEACH, FL 33162 US

FEI Number: 22-2889735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOLDSMITH, JAMES A GOLDSMITH, JAMES A 1595 NE 163RD STREET 1595 NE 163RD STREET

NORTH MIAMI BEACH, FL 33162 US NORTH MIAMI BEACH, FL 33162 US

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: JAMES A GOLDSMITH 04/29/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DPS (X) Change () Addition Name: GOLDSMITH, JAMES A., Address: 1595 NE 163RD STREET Title: DPS (X) Change () Addition Name: GOLDSMITH, JAMES A. Address: 1595 NE 163RD STREET

 Address:
 1595 NE 163RD STREET
 Address:
 1595 NE 163RD STREET

 City-St-Zip:
 N MIAMI BCH, FL 33162
 City-St-Zip:
 N MIAMI BCH, FL 33162

Title: Title: DV (X) Change () Addition () Delete MISKA, DOUGLAS S., Name: Name: MISKA, DOUGLAS S 1595 NE 163RD STREET 1595 NE 163RD STREET Address: Address: N MIAMI BCH, FL 33162 N MIAMI BCH, FL 33162 City-St-Zip: City-St-Zip:

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: JAMES A GOLDSMITH DPS 04/29/2004