## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K74050

HUME, LARA

4850 N 33 CT

HOLLYWOOD, FL 330212319

Name:

Address:

City-St-Zip:

Entity Name: FORTUNOFF'S, INC.

FILED Mar 24, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2525 POLK ST 2526 TAYLOR ST SUITE 4 C/O REAL PRO SUITE 5 HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33020 US **Current Mailing Address: New Mailing Address:** 4850 N 33 COURT HOLLYWOOD, FL 33021 US FEI Number: 58-2043191 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: KAYNE, STEPHAN M 4850 N 33RD COURT HOLLYWOOD, FL 330212319 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition KAYNE, CAROLYN Name: Name: 4850 N 33 COURT Address: Address: City-St-Zip: HOLLYWOOD, FL 330212319 City-St-Zip: Title: VPD () Delete Title: () Change () Addition KAYNE, STEPHAN M Name: Name: 4850 N 33RD COURT Address: Address: HOLLYWOOD, FL 330212319 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition BENKLIFA, AUDREY Name: Name: 4850 N 33 CT Address: Address: City-St-Zip: HOLLYWOOD, FL 330212319 City-St-Zip: Title: SEC ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHAN KAYNE VP 03/24/2004