2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L27532

Entity Name: LORETTA FABRICANT, C.P.A., P.A.

FILED Feb 06, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

% LORETTA FABRICANT LORETTA FABRICANT, CPA, PA 100 SE 2 ST 3910 100 SE 2 ST 3910 MIAMI, FL 33131 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

 % LORETTA FABRICANT
 LORETTA FABRICANT, CPA, PA

 100 SE 2 ST 3910
 100 SE 2 ST 3910

 MIAMI, FL 33131
 MIAMI, FL 33131

FEI Number: 65-0152198 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:

FABRICANT, LORETTA FABRICANT, LORETTA CPA 100 SE 2ND ST., SUITE 3910 MIAMI, FL 33131 US FABRICANT, LORETTA CPA 100 SE 2ND ST., SUITE 3910 MIAMI, FL 33131 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: LORETTA FABRICANT, CPA 02/06/2004

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: () Change () Addition Name: FABRICANT, LORETTA, Name:

 Name:
 FABRICANT, LORETTA,
 Name:

 Address:
 100 SE 2ND ST #3910
 Address:

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:

Title: PST () Delete Title: () Change () Addition

 Name:
 FABRICANT, LORETTA,
 Name:

 Address:
 100 SE 2ND ST #3910
 Address:

 City-St-Zip:
 MIAMI, FL
 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: LORETTA FABRICANT PRES 02/06/2004