


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 12, 2004 8:00 am**  
**Secretary of State**

07-12-2004 90026 006 \*\*\*150.00

<b>DOCUMENT # M18801</b>		
1. Entity Name ANTHONY INTERNATIONAL CORP.		

Principal Place of Business PO BOX 16-0757 MIAMI, FL 33116-0757 US	Mailing Address PO BOX 16-0757 MIAMI, FL 33116-0757 US
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**54061696**



2. Principal Place of Business 12433 S.W. 94th Lane	3. Mailing Address 12433 S.W. 94th Lane
Suite, Apt. #, etc.	Suite, Apt. #, etc.

06242004 Chg-P CR2E034 (10/03)

City & State Miami, Florida	City & State Miami, Florida	4. FEI Number 59-2707212	Applied For Not Applicable
Zip 33186	Country USA	Zip 33186	Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
PERDOMO, MILAGROS 231 ALTARA AVE CORAL GABLES, FL 33146	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS DE HANDAL, JULIETA 12433 S.W. 94TH LANE MIAMI, FL 33186 <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	D HANDAL, ROXANA 12433 S.W. 94TH LANE MIAMI, FL 33186 <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
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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:**  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**  
Date: 7/8/04 Daytime Phone #: (305) 412-4387

Attachment

54061696

# M18801

June 24, 2004

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

**RE: ANTHONY INTERNATIONAL CORP.**  
**Document #M18801**  
**2004 Uniform Business Report (UBR)**

Dear Madam:

Enclosed find our 2004 Uniform Business Report and our check for \$150.00 for the filing fees for the year 2004.

Please be advised that due to the change of mailing address, we never received the Uniform Business Reports in the mail. Please see attached. On this date, our accountant notified us that the report had not been filed and needed to be filed immediately.

Our correct mailing address is: **12433 S.W. 94<sup>th</sup> Lane**  
**Miami, Florida 33186**

We apologize for any inconvenience and thank you for your cooperation in this matter.

Sincerely,



Roxana Handal  
Director

Attachment

54061696  
#M18801

**First Class Mail**  
**First Class Mail**

**BOX CLOSED DUE  
TO NON PAYMENT**

MIRIAM DE TORO, P.A.  
CERTIFIED PUBLIC ACCOUNTANT  
231 ALTARA AVENUE  
CORAL GABLES, FLORIDA 33146

To:

Anthony [REDACTED] Corp.  
P.O. [REDACTED] 16-0757  
[REDACTED], FLORIDA 33116-0757

BOX CLOSED  
DUE TO NON PAYMENT



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