## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M52659

FILED Jan 06, 2004 Secretary of State

Entity Name: HIXSON, MARIN, DESANCTIS & COMPANY, P.A.

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

C/O RAYMOND F. MARIN 16100 N.E. 16TH AVE NORTH MIAMI BCH, FL 331626990

Current Mailing Address: New Mailing Address:

C/O RAYMOND F. MARIN 16100 N.E. 16TH AVE NORTH MIAMI BCH, FL 331626990

FEI Number: 59-2810589 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:

MARIN, RAYMOND F.

16100 N.E. 16TH AVE
NORTH MIAMI BCH, FL

MARIN, RAYMOND F.
16100 N.E. 16TH AVE
NORTH MIAMI BCH, FL 33162

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: 01/06/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 MARIN, RAYMOND F.,
 Name:
 MARIN, RAYMOND F.,

 Address:
 16100 NE 16TH AVE
 Address:
 16100 NE 16TH AVE

Address: 16100 NE 161H AVE

City-St-Zip: N MIAMI BCH, FL

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

Title: () Delete Title: (X) Change ( ) Addition HIXSON, DAVID L., Name: HIXSON, DAVID L., Name: 16100 NE 16TH AVE 16100 NE 16TH AVE Address: Address: N MIAMI BCH, FL N MIAMI BCH, FL 33162 City-St-Zip: City-St-Zip:

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition

Name: DE SANCTIS, PETER V., Address: DE SANCTIS, PETER V., Address: DE SANCTIS, PETER V., Address: 16100 NE 16TH AVE.

City-St-Zip: NORTH MIAMI BEACH, FL City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: RAYMOND F. MARIN PRES 01/06/2004