2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 14, 2004 8:00 am Secretary of State 04-14-2004 90030 020 ***150.00 **DOCUMENT # M61869** SIDNEY YOUNG AND ASSOCIATES, INC. **6404111/** Principal Place of Business Mailing Address 2500 E HALLAPL BCH BLVD P.O. BOX 682 STE 707M HALLANDALE, FL 33008-0682 HALLANDALE, FL 33009 04052004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0033253 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YANOWITZ, SIDNEY B. DO NOT WRITE 1950 S. OCEAN DR. #3D IN THIS SPACE HALLANDALE, FL 33009 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE YANOWITZ, SIDNEY B. NAME 1950 S. OCEAN DR. #3D STREET ADORESS CITY-ST-ZIP HALLANDALE, FL 33009 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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.

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NAME STREET ADDRESS CITY-ST-7IP

SIDNEY B YMNOWITZ

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