

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002411

FILED
Jun 23, 2004
Secretary of State**Entity Name:** MODEL RETREAT, INC.**Current Principal Place of Business:**3135 NW 67TH ST
MIAMI, FL 33147**New Principal Place of Business:****Current Mailing Address:**3135 NW 67TH ST
MIAMI, FL 33147**New Mailing Address:****FEI Number:** 65-0575277**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GRAHAM, EULALEE
3135 NW 67TH ST
MIAMI, FL 33147**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RICHARDS, IAN J
Address: 2401 SW 83RD TERRACE
City-St-Zip: MIRMAR, FL 330255

Title: D () Delete
Name: RICHARDS, DEAN A
Address: 2008 NW 14TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: GRAHAM, EULALEE
Address: 1230 NW 187TH ST
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EULALEE GRAHAM

ADMI

06/23/2004

Electronic Signature of Signing Officer or Director

Date