

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005241

Entity Name: JACKSON PLAZA, INC.

FILED  
Apr 26, 2004  
Secretary of State

## Current Principal Place of Business:

320 COLLINS AVE  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

## Current Mailing Address:

320 COLLINS AVE  
MIAMI BEACH, FL 33139

## New Mailing Address:

FEI Number: 65-1040926

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZUBKOFF, WILLIAM  
320 COLLINS AVE  
MIAMI BEACH, FL 33139

## 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: GALBUT, RUSSELL  
Address: 320 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: ZUBKOFF, WILLIAM  
Address: 320 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: SCHWARTZ, FELICE  
Address: 320 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: KALUS, ELLIOT  
Address: 320 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition  
Name: ZUBKOFF, WILLIAM  
Address: 320 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD (X) Change ( ) Addition  
Name: SCHWARTZ, FELICE  
Address: 320 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Change ( ) Addition  
Name: KALUS, ELLIOT  
Address: 320 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33139

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: RUSSELL GALBUT

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date