2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004
Secretary of State

DOCUMENT# N48280

Entity Name: THE ANNA FUND, INC.

Current Principal Place of Business:

6300 NORTH BAY ROAD
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

6300 NORTH BAY ROAD
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 65-0356477 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVINSON, EDWARD E
407 LINCLON RD
PENTHOUSE EAST
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: GURVEY, MARLENA,
Address: 6300 SW 96TH ST
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: SORREN, PAUL K,
Address: 6300 SW 96TH ST
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: RABINOWITZ, HAROLD R,
Address: 2710 HACKNEY RD
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete
Name: PERKINS, G FREDERICK, JR
Address: 78 GREENACRES AVE
City-St-Zip: SCARSDALE, NY

Title: D ( ) Delete
Name: KASS, FRANKLIN,
Address: 267 N PARKVIEW AVE
City-St-Zip: COLUMBUS, OH

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:

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: PAUL K. SORREN D 07/07/2004
Electronic Signature of Signing Officer or Director Date