

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000000410

Entity Name
MOND BOURSE OF SOUTHEAST UNITED STATES,



Place of Business
169 E. FLAGLER ST., #1037
MIAMI, FL 33131

Mailing Address
169 E. FLAGLER ST., #1037
MIAMI, FL 33131



07092004 No Chg-P CR2E034 (10/03)

4. FEJ Number
65-0980034

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DER, LAWRENCE H
10 HOLLYWOOD BLVD., STE. 401
MIAMI, FL 33020

**DO NOT WRITE
IN THIS SPACE**

I, the above named entity, submit 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

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

OFFICERS AND DIRECTORS

D
PARSONS, DEREK
169 E. FLAGLER ST., #1037
MIAMI, FL 33131

D
FELDMAN, MARK
169 E. FLAGLER ST., #1037
MIAMI, FL 33131

D
STERN, TIBOR
169 E. FLAGLER ST., #1037
MIAMI, FL 33131

ST-ADDRESS
ST-ZIP

ST-ADDRESS
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ST-ZIP

000000165233
07/12/04-80004-023 150.00

**DO NOT WRITE
IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: **DEREK PARSONS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/04 **3053750254**

Date

Daytime Phone #