

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000013970

FILED
Jan 12, 2004
Secretary of State

Entity Name: CONCEPT 2000 PAYROLL CORP.

Current Principal Place of Business:

5201 ANGLERS AVENUE
SUITE #103
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

3250 NORTH 29TH AVE
#200
HOLLYWOOD, FL 33020

Current Mailing Address:

5201 ANGLERS AVENUE
SUITE #103
FT. LAUDERDALE, FL 33312

New Mailing Address:

3250 NORTH 29TH AVE
#200
HOLLYWOOD, FL 33020

FEI Number: 65-0982361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBY, CHARLES E
5201 ANGLERS AVENUE
SUITE #103
FT. LAUDERDALE, FL 33312

Name and Address of New Registered Agent:

JACOBY, CHARLES E
3250 NORTH 29TH AVE
#200
HOLLYWOOD, FL 33020

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: CHARLES JACOBY

01/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JACOBY, CHARLES E
Address: 5201 ANGLERS AVENUE SUITE #103
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: D () Delete
Name: SHELDON, HARVEY
Address: 18142 NW 15TH CT
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: FLOYD, CHARLOTTE
Address: 16475 NE 32ND AVE
City-St-Zip: NORTH MIAMI, FL 33160

Title: D () Delete
Name: HEMPHILL, CHUCK
Address: 22917 OLD INLET BRIDGE DR
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: OLIVIERI, WILLIAM T
Address: 1145 LIDFLOWER STREET
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACOBY, CHARLES E
Address: 3250 NORTH 29TH AVE
City-St-Zip: HOLLYWOOD, FL 33020

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES JACOBY

D

01/12/2004

Electronic Signature of Signing Officer or Director

Date