2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000019866

Entity Name: ARMY-NAVY MERCANTILE, INC

17170 GRAND BAY DRIVE

BOCA RATON, FL 33496

Address: City-St-Zip: FILED Mar 30, 2004 Secretary of State

Littly Na	ine. ARIVIT-IN	AVI WERCANTILE, INC.			
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
1649 N. MILITARY TRAIL WEST PALM BEACH, FL 33409			4130 SW 64TH AVE/E DAVIE, FL 33314	4130 SW 64TH AVE/DAVIE RD DAVIE, FL 33314	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ILITARY TRAIL LM BEACH, FL				
FEI Number	: 20-0013309	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
17170 GRABOCA RA	ITZ, SAMUEL AND BAY DRIN TON, FL 3349 named entity second of the second control of the	6 US	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
0.0.0.		ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () ZACKOWITZ, S 17170 GRAND BOCA RATON,	BAY DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () LITSKY, PETEF 17170 GRAND BOCA RATON,	BAY DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	STD () ZACKOWITZ, E	Delete ELLEN	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SAM ZACKOWITZ PRES 03/30/2004