## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DE

## **Secretary of State** DOCUMENT # P00000036156 07-08-2004 90187 047 \*\*\*150.00 NOTEBOOK CENTER CORP. Principal Place of Business Mailing Address 2021 COOLIDGE STREET 2021 COOLIDGE STREET PUPIRUEE HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 2. Principal Place of Business 3. Mailing Address 1633 Washington Ave 1635 Washington Ave Suite, Apt. #, etc. Suite, Apt. #, etc. 07022004 Cha-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Miami Beach FLorida FLorida 65-1002692 Not Applicable Miami Beuch Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33134 33139 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILCHES, JESUS Street Address (P.O. Box Number is Not Acceptable) 1633 WASHINGTON AVE MIAMI BEACH, FL, 33139 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. **PSD** TITLE Delete TITLE Change | ☐ Addition WILCHES, JESUS NAME NAME STREET ADDRESS 1633 WASHINGTON AVE STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete \_ TITLE \_\_ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 tribs and acquired 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 jeport 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:

Date

Daytime Phone #

FILED

Jul 08, 2004 8:00 am

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## **NOTE BOOK CENTER CORP.**

1633 WASHINGTON AVE MIAMI BEACH FL 33139

July 2, 2004

FLORIDA DEPT. OF STATE Division of Corporations -Annual Report Filings P O Box 6327 Tallahassee FL 32314

RE: 2004 Annual Report #P00000036156

Dear Sir/Madam:

We reviewed our records and we did not received any forms from the Department of State to renew our corporation. We were closed for some period do to the economic conditions at the end of 2003 and we have to move to our old location and maybe it is one of the factors that we did not received any forms, and we open in a new location (Please see our new address above). We found that we have to pay a late fee. We are an small business and under current economic conditions, we can not afford to pay an additional fee to renew the corporation. Please renewed our corporation, we are including the regular fees for 2004.

We appreciate your help.

Sincerely.

Jesus Wilches, President

Attached:

Annual report and \$150.00 check for 2004