

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068245

FILED
Apr 29, 2004
Secretary of State

Entity Name: 542 WASHINGTON AVENUE CORP.

Current Principal Place of Business:

407 LINCOLN ROAD STE 704
MIAMI BEACH, FL 33139

New Principal Place of Business:

1665 WASHINGTON AVENUE
MIAMI BEACH, FL 33139

Current Mailing Address:

407 LINCOLN ROAD STE 704
MIAMI BEACH, FL 33139

New Mailing Address:

1665 WASHINGTON AVENUE
MIAMI BEACH, FL 33139

FEI Number: 65-9861432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASSBERG, DAVID M
407 LINCOLN ROAD STE 704
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

HOLLANDER, MARK J
11410 N. KENDALL DRIVE
SUITE #207
MIAMI, FL 33176 US

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: MARK J. HOLLANDER

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STERN, LYLE B
Address: 407 LINCOLN ROAD STE 704
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS () Delete
Name: KONIVER, BRUCE
Address: 407 LINCOLN ROAD STE 704
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT () Delete
Name: FOX, NELSON
Address: 407 LINCOLN ROAD STE 704
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STERN, LYLE B
Address: 1665 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS (X) Change () Addition
Name: KONIVER, BRUCE
Address: 1665 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT (X) Change () Addition
Name: FOX, NELSON
Address: 1665 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

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: NELSON FOX

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date