

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069070

FILED
Sep 30, 2004
Secretary of State

Entity Name: CHOWDHURY AND CHOWDHURY, INC.

Current Principal Place of Business:

822 N. CHARLESTON AVENUE
FORT MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1195
AVON PARK, FL 33826

New Mailing Address:

P.O. BOX 1195
AVON PARK, FL 33826 US

FEI Number: 59-3657437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHOWDHURY, M. AZAM
4020 RAMIRO STREET
SEBRING, FL 33872 US

Name and Address of New Registered Agent:

CHOWDHURY, M. AZAM
P.O. BOX 1195
AVON PARK, FL 33826 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: AZAM M CHOWDHURY

09/30/2004

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHOWDHURY, M. AZAM
Address: 4020 RAMIRO STREET
City-St-Zip: SEBRING, FL 33872

Title: STD () Delete
Name: CHOWDHURY, MOHAMMAD N
Address: 1720 US HWY 27 N, #01
City-St-Zip: AVON PARK, FL 33872

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHOWDHURY, M. AZAM
Address: P.O. BOX 1195
City-St-Zip: AVON PARK, FL 33826 US

Title: STD (X) Change () Addition
Name: CHOWDHURY, MOHAMMAD N
Address: P.O. BOX 1195
City-St-Zip: AVON PARK, FL 33826 US

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: AZAM M. CHOWDHURY

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09/30/2004

Electronic Signature of Signing Officer or Director

Date