


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 30, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P00000079343	
1. Entity Name CD EXCHANGE, INC.	

Principal Place of Business 2902 N. STATE ROAD 7 LAUDERDALE LAKES, FL 33313	Mailing Address 2902 N. STATE ROAD 7 LAUDERDALE LAKES, FL 33313
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**DO NOT WRITE IN THIS SPACE**



08272004 No Chg-P CR2E034 (10/03)

4. FE( Number 65-0233998	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PAULL, LARRY  
2902 N. STATE ROAD 7  
LAUDERDALE LAKES, FL 33313

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P PAULL, LARRY 2902 N. STATE ROAD 7 LAUDERDALE LAKES, FL 33313
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08/30/04-80006-004 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY PAULL, PRES 8/27/04 954-733-6581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone