

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079868

Entity Name: 844 ALTON ROAD, INC.

FILED
Feb 21, 2004
Secretary of State

Current Principal Place of Business:

844 ALTON ROAD, 2ND FLOOR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

844 ALTON ROAD, 2ND FLOOR
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-1039898

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, PEDRO A
201 ALHAMBRA CIRCLE
SUITE 705
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

RICHARD, TOLEDO
21 SE 1ST AVENUE
SUITE 705
MIAMI, FL 33131 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: RICHARD TOLEDO

02/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BAZZI, ALI AYOUB
Address: 1700 N.E. 199TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D () Delete
Name: KALIL, ABDALJA FAYEZ
Address: 844 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KALIL, ABDALA FAYEZ
Address: 844 ALTON ROAD
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: ABDALA KALIL, M.D.

D

02/21/2004

Electronic Signature of Signing Officer or Director

Date