
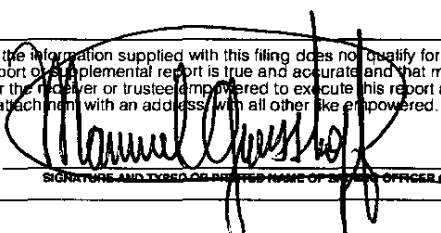


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90667 025 ***150.00

DOCUMENT # P00000099176			
1. Entity Name CITY PLAZA CORP.			
Principal Place of Business 321 JEFFERSON ST. 2ND FLOOR HOLLYWOOD, FL 33019		Mailing Address 321 JEFFERSON ST. 2ND FLOOR HOLLYWOOD, FL 33019	
2. Principal Place of Business 18851 N.E. 29th AVE.		3. Mailing Address 18851 N.E. 29th AVE.	
Suite, Apt. #, etc. 722		Suite, Apt. #, etc. 722	
City & State AVENTURA, FLA.		City & State AVENTURA, FLA.	
Zip 33180	Country U.S.A.	Zip 33180	Country U.S.A.
6. Name and Address of Current Registered Agent ROUSSO, MARK E ESQ 3440 HOLLYWOOD BLVD #360 HOLLYWOOD, FL 33021		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SAAL, JOSE NORBERTO 321 JEFFERSON ST. 2ND FLOOR HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	18851 N.E. 29th AVE., #722 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition AVENTURA, FLA. 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROUSSO, MARK E 321 JEFFERSON ST. 2ND FLOOR HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	18851 N.E. 29th AVE., #722 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition AVENTURA, FLA. 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GROSSKOPF, MANUEL 321 JEFFERSON ST. HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	18851 N.E. 29th AVE., #722 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition AVENTURA, FLA. 33180
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: 		Date _____ Daytime Phone # _____	