

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000101502

Entity Name: SARALYN NEMSER, P.A.

FILED  
Mar 31, 2004  
Secretary of State

**Current Principal Place of Business:**

19032 N.E. 29TH AVENUE  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

19032 N.E. 29TH AVENUE  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 65-1052235

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NEMSER, SARALYN  
19032 N.E. 29TH AVENUE  
AVENTURA, FL 33180

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: NEMSER, SARALYN  
Address: 19032 NE 29TH AVENUE  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: SARALYN NEMSER

P

03/31/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date