2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 15, 2004 8:00 am Secretary of State

	ANNOAL	- REPORT					miy or		
DOCUMENT # P00000109318 1. Entity Name TRAILMATE INVESTMENT GROUP, INC.						01-15-20	04 90009 038 *	**150.00	
Principal Plac	ce of Business	Mailing Address			1	_			
2239 HARBOURSIDE DR 2239 HARBO			ADDRIDGING 13419 Bluthe			RACE			
LONGBOAT KEY, FL		2239 HARBOURSIDE DR 13419 Blyther LONGBOAT KEY, FL			1				
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2. Principal i	Place of Business	3. Mailing Address							
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Suite, Apt. #, etc.		Suite, Apt. #, etc.			04402004	Oh- D	OD05004 (40/0	~ 1	
					01102004	Chg-P	CR2E034 (10/0	3)	
City & Sta	te	City & State	City & State			···		Applied For	
					65-1060894 Not Applicable			Not Applicable	
Zip	Country	Zip Cou		try			п \$8.75 /	¢0.75 Additional	
					5. Certificate of Status Desired		Fee Required		
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New R	egistered Agent		
	AS			Name					
ELIOT, CI	HARNES	Blythefield tea		<u></u>					
	BOURSIDE DR (2919)	midine visia la	re	Street Address (P.O. Box Number	is Not Acceptable)		
FONC BO	HATRKEY, FL 34220 BRAD	author It zusun							
		101-11 5 1 201						ŀ	
				City	·····		FL Zip C	ode	
8. The above	e named entity submits this statement for tions of registered agent.	or the purpose of changing its r	egister	ed office or register	ed agent, or both	in the State of Flo	rida. I am familiar wi	th, and accept	
nie odilga	lions or registered agent.							1	
SIGNATURE.								1	
Oldivitorie.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registere	d Agent signature required	when reinstating)	*	DATE		
·····									
Fil After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.	9. Election Campaig Trust Fund Contri		_ +0.	.00 May Be ed to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFFI	CERS AND DIRECTO	PS IN 11	
TITLE	D	☐ Defete	ותוד		110 21110/10/10		☐ Chang		
NAME	CHARNAS, ELIOT		NAM	ſ			C) (rigily	Modition	
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CITY-ST-ZIP	LONGBOAT KEY, FL BA	Derton H 34202		-ST-20P					
TITLE	D		7/7)						
NAME	MARCOS, MARTIN	Li Delete	TITLE	1			☐ Chang	e 🔲 Addition	
STREET ADDRESS	2239 HARBOURSIDE DR		NAM	1					
CITY-ST-ZIP	LONGBOAT KEY, FL		4	ET ADDRESS					
			_	-ST-ZIP					
TITLE _	D Defete					، حسب ب بست	Chang	Addition	
NAME .	CHARNAS, MICHAEL		NAM	:			·		
STREET ADDRESS	2239 HARBOURSIDE DR			ET ADDRESS				ľ	
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NAME			NAMI						
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CITY-ST-ZIP				ST-ZIP				1	
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CITY-ST-ZIP	1			ET ADDRESS					
	L		•	ST-ZIP					
12. I hereby of	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empty or on an attachment with an address.	this filing does not qualify for t	he exer	nption stated in Sec	ction 119.07(3)(i),	Florida Statutes. I	further certify that the	information	
of the cor	rporation or the receiver or trustee empi	owered to execute this report a	s requir	ed by Chapter 607	ьапо тедагепеста , Florida Statutes:	and that my name	aur; tnat i am an offic appears in Block 10	er or director or Block 11 if	
changed,	, or on an attachment with an address,	with all other like empowered.	•			1 /			
01011-	upr (//					113/11			
SIGNAT	UHE:	PRINTED NAME OF SIGNING OFFICER OF		-		47/07			
	✓ DRAMA TUNE AND TIPED OR F	-maries mane of skining offices of	T LUMBECT	UR		1Date [Daytime Phone		