

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001939

FILED
Apr 30, 2004
Secretary of State

Entity Name: HOQUE & HOQUE PLUS DISTRIBUTING INC.

Current Principal Place of Business:

905 KOKOMO KEY LANE
DELRAY BEACH, FL 33483

New Principal Place of Business:

30 SE 4TH STREET
DELRAY BEACH, FL 33477

Current Mailing Address:

905 KOKOMO KEY LANE
DELRAY BEACH, FL 33483

New Mailing Address:

9825 VIA AMATI
LAKE WORTH, FL 33467

FEI Number: 65-1066800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOQUE, AHM A
905 KOKOMO KEY LANE
DELRAY BEACH, FL 33483

Name and Address of New Registered Agent:

HOQUE, AHM A
9825 VIA AMATI
LAKE WORTH, FL 33467

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

04/30/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOQUE, AHM A
Address: 905 KOKOMO KEY LANE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOQUE, AHM A
Address: 9825 VIA AMATI
City-St-Zip: LAKE WORTH, FL 33467

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: AHM A. HOQUE

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date