


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 16, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000006318</b> 1. Entity Name <b>FLORIDA'S PROPERTY MANAGEMENT GROUP CORP.</b>	
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Principal Place of Business <b>2500 W. 78 STREET BAY #4 HIALEAH, FL 33016</b>	Mailing Address <b>PO BOX 160718 STE 102 HIALEAH, FL 33016</b>
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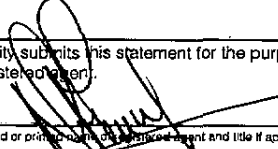
**DO NOT WRITE IN THIS SPACE**



02052004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-1069026</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>FERRO, NOEL 11027 W. OKEECHOBEE RD. #102 HIALEAH GARDENS, FL 33018</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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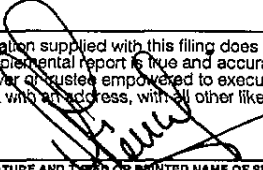
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  <b>NOEL FERRO</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE <b>FEB. 5 / 2004</b>

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD <b>FERRO, NOEL 11027 W. OKEECHOBEE RD. #102 HIALEAH GARDENS, FL 33018</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD <b>FERRO, ORLANDO 11033 W OKEECHOBEE RD. #102 HIALEAH GARDENS, FL 33018</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TSR <b>LAMELAS, YAQUELIN 11027 W. OKEECHOBEE RD. #102 HIALEAH, FL 33018</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <b>FERRO, DORELIA 11033 W. OKEECHOBEE RD. #102 HIALEAH, FL 33018</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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02/17/04-80007-025 150.00

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:  <b>ORLANDO FERRO</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <b>2/5/04</b> Daytime Phone # <b>305-821-1794</b>