

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000019718

1. Entity Name  
DOLLARS & SENSE INTERNATIONAL, INCORPORATED



Principal Place of Business  
18721 NW 11TH PLACE  
MIAMI, FL 33169

Mailing Address  
18721 NW 11TH PLACE  
MIAMI, FL 33169



04302004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1083151

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

GARRETT, DWAYNE D  
18721 NW 11TH PLACE  
MIAMI, FL 33169

**DO NOT WRITE  
IN THIS SPACE**

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 ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	DP
NAME	GARRETT, DWAYNE D
STREET ADDRESS	18721 NW 11TH PLACE
CITY-STATE-ZIP	MIAMI, FL 33169
TITLE	D
NAME	GARRETT, DAVID L
STREET ADDRESS	18721 NW 11TH PLACE
CITY-STATE-ZIP	MIAMI, FL 33169
TITLE	DV
NAME	GARRETT, MERCEDES
STREET ADDRESS	18721 NW 11TH PLACE
CITY-STATE-ZIP	MIAMI, FL 33169
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

000000155461  
05/05/04-80037-008 150.00

**DO NOT WRITE  
IN THIS SPACE**

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: Dwayne Garrett  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-30-04  
Date

Daytime Phone