


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 27, 2004 8:00 am**  
**Secretary of State**

02-27-2004 90017 038 \*\*\*150.00

<b>DOCUMENT # P01000044424</b>	
1. Entity Name <b>ANTHONY COLANGELO &amp; ASSOCIATES, INC.</b>	

Principal Place of Business <b>3011 N.E. 21ST AVE. LIGHTHOUSE POINT, FL 33064 1941 N. DIXIE HWY (#7) POMPANO BEACH, FL. 33060</b>	Mailing Address <b>3011 N.E. 21ST AVE. LIGHTHOUSE POINT, FL 33064 1941 N. DIXIE HWY POMPANO BEACH, FL. 33060</b>
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**DO NOT WRITE IN THIS SPACE**



02162004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-1096691</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

**COLANGELO, ANTHONY  
3011 N.E. 21ST AVE.  
LIGHTHOUSE POINT, FL 33064  
1941 N. DIXIE HWY (#7)  
POMPANO BEACH, FL. 33060**

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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: *Anthony Colangelo* DATE: 2/20/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<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	<b>P COLANGELO, ANTHONY 3011 N.E. 21ST AVE. LIGHTHOUSE POINT, FL 33064 1941 N. DIXIE HWY POMPANO BEACH FL. 33060</b>
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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: *Anthony Colangelo* DATE: 2/20/04 (954) 298-8979

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #