## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000053664

Entity Name: M & S FULFILLMENT, INC.

**FILED** Apr 06, 2004 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

1335 53RD STREET

WEST PALM BEACH, FL 33407

**New Mailing Address: Current Mailing Address:** 

1335 53RD STREET

WEST PALM BEACH, FL 33407

FEI Number: 65-1113608 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRAMS, DANIEL J ESQ 1645 PALM BCH LAKES BLVD., SUITE 1050 W. PALM BCH, FL 33401

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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete

RAMUS, SUSAN L Name: 4120A PALM BAY CIR. Address:

City-St-Zip: W. PALM BCH, FL 33406

Title: DP () Delete Name: JACOB, MAURICE

4120A PALM BAY CIR. Address: W. PALM BCH, FL 33406 City-St-Zip:

Title: (X) Change ( ) Addition

Name: RAMUS, SUSAN L

1335 53RD STEET, UNIT 3 Address: City-St-Zip: W. PALM BCH, FL 33407

Title: DP (X) Change ( ) Addition

Name: JACOB, MAURICE

1335 53RD STREET, UNIT 3 Address: Citv-St-Zip: W. PALM BCH, FL 33407

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: SUSAN RAMUS MS 04/06/2004