2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 07, 2004 8:00 am
Secretary of State
06-07-2004 90004 030 ***150.00

DOCUMENT # P01000057602

1. Entity Name
SLG I CORPORATION

14023366

Principal Place of Business	Mailing Address
640 SOUTH PARK ROAD APT 4-16 HOLLYWOOD, FL 33021	640 SOUTH PARK ROAD APT 4-16 HOLLYWOOD, FL 33021

04272004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
4935 SW 31st Terrace	4935 SW 31st Terrace
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Dania Beach	City & State: Dania Beach
Zip: 33312 Country: USA	Zip: 33312 Country: USA

4. FEI Number: 65-1104788 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GORDON, SHELLEY L 640 SOUTH PARK ROAD APT 4-16 HOLLYWOOD, FL 33021	Name: Gordon, Shelley L Street Address (P.O. Box Number is Not Acceptable): 4935 SW 31st Terrace City: Dania Beach FL Zip Code: 33312

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

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GORDON, SHELLEY L 640 SOUTH PARK ROAD HOLLYWOOD, FL 33021	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gordon, Shelley L. 4935 SW 31st Terrace Dania Beach, FL 33312
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

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: _____ 4/26/04 305-613-4576
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #