

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058790

FILED  
Apr 28, 2004  
Secretary of State

**Entity Name:** FORECLOSURE MANAGEMENT SERVICE, INC.

**Current Principal Place of Business:**

12865 W DIXIE HWY  
MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 80-0225  
AVENTURA, FL 33280

**New Mailing Address:**

**FEI Number:** 65-1110005

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SKOP, MICHAEL  
12865 W DIXIE HWY  
MIAMI, FL 33161

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

MACIER, RICHARD  
12865 W DIXIE HWY  
MIAMI, FL 33161

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: RICHARD MACIER

04/28/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MACIER, RICHARD R  
Address: 12865 W DIXIE HWY  
City-St-Zip: MIAMI, FL 33161

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RICHARD MACIER

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date