

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085969

Entity Name: NEONCUPS.COM, INC.

FILED
Mar 09, 2004
Secretary of State

Current Principal Place of Business:

880 N.E. 75TH STREET
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

PO BOX 451111
MIAMI, FL 33245

New Mailing Address:

880 N E 75 STREET
MIAMI, FL 33138

FEI Number: 04-3617864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERSWON, SCOTT
880 NE 75TH ST.
MIAMI, FL 33138 US

Name and Address of New Registered Agent:

MERSHON, SCOTT
880 NE 75TH ST.
MIAMI, FL 33138 US

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: SCOTT MERSHON

03/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PITA, JOE
Address: 880 N.E. 75TH STREET
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: MERSHON, SCOTT
Address: 1325 SW 22ND TERR
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: MUSKAT, MICHAEL A
Address: 10901 BRIGHTON BAY BLVD N.E.; UNIT 4107
City-St-Zip: SAINT PETERSBURG, FL 33716

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MERSHON, SCOTT
Address: 3510 SW 120TH AVENUE
City-St-Zip: MIAMI, FL 33175

Title: D (X) Change () Addition
Name: MUSKAT, MICHAEL
Address: 190 RIVERWALK CIRCLE
City-St-Zip: SUNRISE, FL 33326

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: SCOTT MERSHON

D

03/09/2004

Electronic Signature of Signing Officer or Director

Date