

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90341 037 ***150.00

DOCUMENT # P01000091377

1. Entity Name
PERRINE STATION, INC.



Principal Place of Business
12305 S DIXIE HWY
MIAMI, FL 33156

Mailing Address
12305 S DIXIE HWY
MIAMI, FL 33156



04282004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1141065	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6.- Name and Address of Current Registered Agent

GORMAN, LENARD H
1320 S DIXIE HWY PENTHOUSE 1275
CORAL GABLES, FL 33146

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST FONTECILLA, CARLOS 12305 S DIXIE HIGHWAY MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BEGELMAN, CAROL 12305 S DIXIE HIGHWAY MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUEVARA, MIGUEL 12305 S DIXIE HIGHWAY MIAMI, FL 33156
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *CBegelman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/04
Date

Daytime Phone #