

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095600

FILED  
Sep 08, 2004  
Secretary of State

Entity Name: LAW OFFICES OF P. HELDER BERNARD, P.A

## Current Principal Place of Business:

195-53 NORTH WEST 2ND AVENUE  
SUITE 209  
MIAMI, FL 33169

## New Principal Place of Business:

## Current Mailing Address:

195-53 NORTH WEST 2ND AVENUE  
SUITE 209  
MIAMI, FL 33169

## New Mailing Address:

FEI Number: 65-1151288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERNARD, ESQ., PETER  
14880 SW 45 COURT  
MIRAMAR, FL 33027

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BERNARD, PETER H  
Address: 14880 SW 45TH COURT  
City-St-Zip: MIRAMAR, FL 33027

Title: S ( ) Delete  
Name: BERNARD, NANCY P  
Address: 14880 SW 45TH COURT  
City-St-Zip: MIRAMAR, FL 33027

Title: T ( ) Delete  
Name: DIMANCHE, CARLYL  
Address: 14880 SW 45TH COURT  
City-St-Zip: MIRAMAR, FL 33027

Title: VP ( ) Delete  
Name: DESPRADEL, PASCAL  
Address: 3033 WEST MISSIONWOOD CIRCLE  
City-St-Zip: MIRAMAR, FL 33025

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: PASCAL DESPRADEL

V/P

09/08/2004

Electronic Signature of Signing Officer or Director

Date