## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 12, 2004 08:00 AM **ANNUAL REPORT** DOCUMENT # P01000109055 . . . **Secretary of State** AWARD BUSINESS BROKERS FL, INC. Principal Place of Business Mailing Address 1201 US HIGHWAY ONE SUITE 220 1201 US HIGHWAY ONE SUITE 220 NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408 01072004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1153638 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WOZNIAK, ROGER B DO NOT WRITE 1201 US HIGHWAY ONE SUITE 220 NORTH PALM BEACH, FL 33408 IN THIS SPACE 5. 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 Signature, typed or printed name of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PST TITLE *U0000000029*57 WOZNIAK, ROGER B NAME 01/13/04-80035-023 158.75 STREET ADDRESS 1201 U.S. HWY ONE, SUITE 220 CRTY-ST-ZIP NORTH PALM BEACH, FL 33408 TITLE NAME WOZNIAK, ROGER B III STREET ADDRESS 14 HICKORY HILL ROAD CITY-ST-ZIP TEQUESTA, FL 33469 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME

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:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TOPED OF PRINTED MANE OF SIGNING OFFICE FOR DISPICTOR

Jan 7, 2004 (561) 626-1200

Daylinte Phone #

FILED