## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 18, 2005 8:00 am Secretary of State DOCUMENT # P01000109449 1. Entity Name 04-18-2005 90309 041 \*\*\*150.00 AN OCCASIONAL PIECE, INC. Principal Place of Business Mailing Address C/O ALLEN DAVID MARCUS C/O ALLEN DAVID MARCUS 849 UNIVERSITY BLVD. #108 -849 UNIVERSITY BLVD: #108 AUPITER, FL -33458 JUPITER; FL 33458 2. Principal Place of Business 3. Mailing Address 1470 WELLINGTON GREEN OR 1470 WELLINGTON GREEN DR. Suite, Apt. #, etc. Suite, Apt. #, etc. 01152005 Chg-P CR2E034 (10/03) SUITE SUITE # 102 City & State 4. FEI Number City & State Applied For FL. WELLINGTON, FL WELLINGTON 02-0531104 Not Applicable 33414 \$8.75 Additional 5. Certificate of Status Desired VSD VS Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **ALLEN DAVID MARCUS** MARCUS, ALLEN D 2470 WELLINGTON GREEN DR Street Address (P.O. Box Number is Not Acceptable) 849 UNIVERSITY BLVD. SUITE 108 #102 JUPITER, FL 33458 MELLINGTON, FL 33414 City Zip Code 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\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TIDE ח Delete TITLE Change Addition MARCUS, ALLEN D NAME 2470 WELLINGTON GREEN DR #102 840 UNIVERSITY BLVD: #108 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 > WELLINGTON, Pl. 33414 CCTY-ST-ZIP TITLE D ☐ Delete ☐ Change ☐ Addition TITLE NAME PYLE LAWRENCE NAME 2470 WELLINGTON GREEN DR. # 107 STREET ADDRESS 849 UNIVERSITY BLVD: #108 STREET ADDRESS WELLINGTON, FL. 33414 CITY-ST-ZIP JUPITER, FL 33458 CITY-ST-ZIP TITLE Addition ☐ Detete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP III! F □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete MLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TILE ☐ Detete TTLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplies 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 comporation or the teceiver or trusted 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 affaction with an address, with all other like empowered. ALLON DAVID MARCUS 3/21/05 SIGNATURE: 561-333-7120

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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