


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90352 005 ***150.00

DOCUMENT # P01000118177			
1. Entity Name BERLIN REAL ESTATE AND DEVELOPMENT CORP.			
Principal Place of Business 14 S 'E' STREET LAKE WORTH FL 33460		Mailing Address 1213 LAKE AVE LAKE WORTH FL 33460	
2. Principal Place of Business 1213 Lake Ave #108 Suite, Apt. #, etc. Lake Worth Fl 33460		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip 33460	Country USA	Zip	Country
6. Name and Address of Current Registered Agent RATCLIFF, KEVIN 14 S 'E' STREET LAKE WORTH FL 33460 <i>new address change only</i>		7. Name and Address of New Registered Agent Name: Kevin Ratcliff Street Address (P.O. Box Number is Not Acceptable) 1213 Lake Ave #108 City: Lake Worth FL Zip Code: 33460	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDTV RATCLIFF, KEVIN 14 S 'E' STREET LAKE WORTH FL 33460 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDTV ANGEL GONZALEZ 1213 LAKE AVENUE, LAKE WORTH FL 33460 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RATCLIFF, KEVIN 14 S 'E' STREET LAKE WORTH FL 33460 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT WILLIAM HEINAY 1213 LAKE AVE LAKE WORTH, FL 33460 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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MOORE CR2E034 (11/03)

4. FEI Number 65-1159401 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

24 APR 04 561 352-0521
Date Daytime Phone #

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.