

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000013486 1. Entity Name H & J KAROUNOS ENTERPRISE, INC.	
---	---

Principal Place of Business 4410 S. TAMiami TRAIL SARASOTA, FL 34231-3452	Mailing Address 4410 S. TAMiami TRAIL SARASOTA, FL 34231-3452
---	---

DO NOT WRITE IN THIS SPACE



02182004 No Chg-P CR2E034 (10/03)

4. FEI Number 01-0569828	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ANTONY, JENNIFER K 417 N. BRIGGS AVENUE #706 SARASOTA, FL 34237
--

**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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE _____

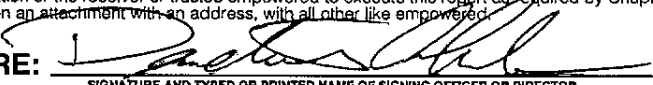
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ANTONY, JENNIFER K 5525 EASTWIND DR SARASOTA, FL 34233
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KAROUNOS, HILDEGARDE 1055 PEPPERTREE DRIVE #803 SARASOTA, FL 342423231
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ANTONY, DEMETRIUS A 5525 EASTWIND DR SARASOTA, FL 34233
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000155417
05/05/04-80036-008 150.00

**DO NOT WRITE
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)(f), 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:  **2/19/04 941-365-7938.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Demetrios Antony