

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000019618

**FILED**  
**Mar 18, 2004**  
**Secretary of State**

**Entity Name:** JAIMON PAUL & SIMON, INC.

**Current Principal Place of Business:**

9453 SW 51 CT.  
COOPER CITY, FL 33328

**New Principal Place of Business:**

15121 MEADHAVEN STREET  
DAVIE, FL 33331

**Current Mailing Address:**

9453 SW 51 CT.  
COOPER CITY, FL 33328

**New Mailing Address:**

15121 MEADHAVEN STREET  
DAVIE, FL 33331

**FEI Number:** 02-0585823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FEINBERG, JEFFREY  
4000 HOLLYWOOD BLVD., SUITE 350-N  
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

THOMAS, THOMAS  
12839 NW 18 COURT  
PEMBROKE PINES, FL 33028 US

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: JOSE THOMAS

03/18/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ABRAHAM, JAIMON  
Address: 9453 SW 51 CT.  
City-St-Zip: COOPER CITY, FL 33328

Title: D ( ) Delete  
Name: JOSEPH, PAUL  
Address: 15320 NW 6 CT  
City-St-Zip: PEMBROKE PINES, FL 33028

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ABRAHAM, JAIMON  
Address: 15121 MEADHAVEN STREET  
City-St-Zip: DAVIE, FL 33331

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: JAIMON ABRAHAM

P

03/18/2004

Electronic Signature of Signing Officer or Director

Date