

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021604

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: BBTM HOSPITALITY WORLDWIDE, INC.

## Current Principal Place of Business:

2300 E. LAS OLAS BLVD., STE. 500  
FT. LAUDERDALE, FL 33301

## New Principal Place of Business:

## Current Mailing Address:

2300 E. LAS OLAS BLVD., STE. 500  
FT. LAUDERDALE, FL 33301

## New Mailing Address:

FEI Number: 04-3673927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUGAY, STEVEN  
2300 E. LAS OLAS BLVD. STE 500  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BOSHIER, ANITA  
Address: 875 NE 28TH STREET #206  
City-St-Zip: WILTON MANORS, FL 33334

Title: V ( ) Delete  
Name: TILLBERG, TOMAS  
Address: 309 NE 14TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TS ( ) Delete  
Name: BUGAY, STEVEN  
Address: 809 SW 14TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D ( ) Delete  
Name: PICARO, GUISEDE  
Address: VIA CARNIA 57B/44  
City-St-Zip: GENOVA, ITALY,

Title: D ( ) Delete  
Name: MOINO, MARPLETO  
Address: 15552 SW 15TH STREET  
City-St-Zip: DAVIE, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANITA BOSHIER

P

04/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date