2004 FOR PROFIT CORPORATION ... ANNUAL REPORT

FILED Mar 11, 2004 08:00 AM Secretary of State

1. Entity Nam	MENT # P020000274	150					
Principal Place of Business Mailing Address 2625 COLLINS AVE., SUITE 1605 2625 COLLINS AVE., SUITE 1605 MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140							
DO NOT WRITE IN THIS SPAC				03012004 4. FEI Numb 01-064		CR2E034 (10	Till Britan II laur
SZEJNBLUM, DINA M 2625 COLLINS AVE., SUITE 1605 MIAMI BEACH, FL 33140			DO NOT WRITE IN THIS SPACE				
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. 3/8/03							
	E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00 OFFICERS AND DE			.00 May Se led to Fees	U000 03/11/0	100085631 14 <u>-80</u> 055-0	111 15A QO
THE NAME STREET ADDRESS GITY-SI-ZIP	PD SZEJNBLUM, DINA MARIELA 2625 COLLINS AVE., SUITE 1605 MIAMI BEACH, FL 33140	necions					
TATLE NAME STREET ADDRESS CITY-ST-ZIP							
RIFLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
name Street address City-St-Zip				IN [*]	THIS SF	PACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIR							
TOTE NAME STREET ADDRESS OUTV-51-ZIP							
12. I hereby certify that the information supplied with this filling 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 ceth, 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 charged, or on an attachment with an address, with all other like empowered.							