2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0200031665

1. Entity Name SZIEBERT PROPERTIES, INC.

FILED Apr 30, 2004 08:00 AM Secretary of State

Principal Place of Business

SIGNATURE

100 W CYPRESS CREEK RD, STE 700 FT LAUDERDALE, FL 33309

Mailing Address

C/O MILMAN & COMPANY 203-1881 STEELES AVE W TORONTO, CANADA M3H 5Y4,

CA



DO NOT WRITE IN	I THIS	SPACE
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01152004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For

01-0662918

5. Certificate of Status Desired

2004/04/08

(416) 359-2393

Daytime Phone #

Not Applicable
\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TRCA, MICHELLE G ESQ MICHELLE G. TRCA, P.A. 2455 E. SUNRISE BLVD., SUITE 905 FT LAUDERDALE, FL 33304

## 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 fills if applicable (NOTE Registered Agent signature required when reinstating) OATE						
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution		cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREGOUDOV, ANDREI 5 NEW HAVEN DR TORONTO ONTARIO M5N 1H8,				555093145997 95598794+30042-019 1 <b>50.00</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREGOUDOV, LIODMILA 5 NEW HAVEN DR TORONTO ONTARIO M5N 1H8,				75.795494 mayya <b>2-y</b> 13 ( <b>50.0</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP						
THE NAME STREET ADDRESS CHY-ST-ZIP						
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 1 further certify that the information indicated on this report or supplemental tepert 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.						

PEREGOUDOV DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR