


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000043790
 1. Entity Name
 TWERY ASSOCIATES, INC.



Principal Place of Business 1632 PENNSYLVANIA AVENUE MIAMI BEACH, FL 33139	Mailing Address 1632 PENNSYLVANIA AVENUE MIAMI BEACH, FL 33139
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DO NOT WRITE IN THIS SPACE



02122004 No Chg-P CR2E034 (10/03)

4. FEI Number 43-1959088	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ROBINS, CRAIG
 1632 PENNSYLVANIA AVENUE
 MIAMI BEACH, FL 33139

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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 _____ (NOTE: Registered Agent signature required when reinstating) 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

U00000101129
 04/01/04-80035-020 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROBINS, CRAIG 1632 PENNSYLVANIA AVENUE MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRETENSTEIN, STEVEN 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Twery Associates, Inc. Vice President **2/13/04** (305) 531-8700
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #