2004 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Feb 11, 2004 08:00 AM Secretary of State DOCUMENT # P02000049687 VINCENT MALGERI, INC. Principal Place of Business Mailing Address 7785 S.W. 86TH STREET #E219 MIAMI, FL 33143 7785 S.W. 86TH STREET #E219 MIAMI, FL 33143 CR2E034 (10/03) No Chg-P 02052004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0686297 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MALGERI, VINCENT DO NOT WRITE 7785 S.W. 86TH STREET #E219 MIAMI, FL 33143 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 title if applicable (NOTE Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITEF MALEGRI, VINCENT NAME 7785 SW 86TH ST., #E219 U00000046078 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33143 02/11/04-90088-009 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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. 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:

City-ST-ZiP

VINCENT MALGER! SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR