

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90038 028 ***150.00

DOCUMENT # P02000050397

1. Entity Name

BARON-MURPHY HOLDINGS, INC.



Principal Place of Business

**921 SPANISH CIRCLE STE 333E
DELRAY BEACH FL 33483**

Mailing Address

**921 SPANISH CIRCLE STE 333E
DELRAY BEACH FL 33483**

2. Principal Place of Business

1920 S. OCEAN BLVD

Suite, Apt. #, etc.

VILLA D

3. Mailing Address

1920 S. OCEAN BLVD

Suite, Apt. #, etc.

VILLA D

City & State

DELRAY BEACH, FL

City & State

DELRAY BEACH, FL

Zip

33483

Country

PALM BCH

Zip

33483

Country

PALM BCH



MOORE

CR2E034 (11/03)

4. FEI Number

43-1962833

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1920 S. OCEAN BLVD

VILLA D

City

DELRAY BEACH

FL

33483

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**P
BARON-MURPHY, JANET
921 SPANISH CIRCLE STE 333E
DELRAY BEACH FL 33483**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**1920 S. OCEAN BLVD, VILLA D
DELRAY BEACH, FL 33483**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**ST
MURPHY, CURRAN
921 SPANISH CIRCLE STE 333E
DELRAY BEACH FL 33483**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**1920 S. OCEAN BLVD, VILLA D
DELRAY BEACH, FL 33483**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
MURPHY, KENDL ANN
142 WEST 88TH STREET 3F
NEW YORK NY 10024**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-703-6789