2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000056648

Entity Name: INVESTOR RELATIONS OF FLORIDA, INC.

FILED Apr 02, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

5100 N FEDERAL HWY STE 409 800 W. CYPRESS CREEK RD. FT LAUDERDALE, FL 33308

SUITE 470

FT LAUDERDALE, FL 33309 US

Current Mailing Address: New Mailing Address:

5100 N FEDERAL HWY STE 409 800 W. CYPRESS CREEK RD.

SUITE 470 FT LAUDERDALE, FL 33308

FT LAUDERDALE, FL 33309 US

FEI Number: 02-0604511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LEGAL, LARRY

LEGEL, LARRY 800 W. CYPRESS CREEK RD. 5100 N FEDERAL HWY, STE 409 SUITE 470 FT LAUDERDALE, FL 33308

FT LAUDERDALE, FL 33309 US

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.

SIGNATURE: LARRY LEGEL 04/02/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SANZARI, TONY SANZARI, TONY DP Name: Name: 2100 N OCEAN BLVD STE 805 2100 N OCEAN BLVD STE 805 Address: Address:

City-St-Zip: FT LAUDERDALE, FL 33305 City-St-Zip: FT LAUDERDALE, FL 33305 US

Title: (X) Change () Addition Title: () Delete AS

Name: LEGEL, LARRY Name: LEGEL, LARRY AS

5100 N. FEDERAL HIGHWAY SUITE 409 800 W. CYPRESS CREEK RD., #470 Address: Address: FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33309 US City-St-Zip: City-St-Zip:

() Delete Title: Title: **VPD** () Change (X) Addition

PUMPER, SCOTT VPD Name: Name: 2636 N.E. 15TH ST. Address Address:

City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33304 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONY SANZARI DP 04/02/2004