

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061797

Entity Name: MAUDAN, INC.

FILED
Apr 27, 2004
Secretary of State

Current Principal Place of Business:

1230 NW 49 STREET
POMPANO BEACH, FL 33064

New Principal Place of Business:

5125 EL PINE WAY
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

1230 NW 49 STREET
POMPANO BEACH, FL 33064

New Mailing Address:

5125 EL PINE WAY
PALM BEACH GARDENS, FL 33418

FEI Number: 04-3692243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCORINTI, DOMINGO A
1230 NW 49 STREET
POMPANO BEACH, FL 33064

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ACCORINTI, DOMINGO A
Address: 1230 NW 49 STREET
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD (X) Delete
Name: MICELI, GRACIELA
Address: 1230 NW 49 STREET
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MICELI, GRACIELA
Address: 5125 EL PINE WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GRACIELA MICELI

PD

04/27/2004

Electronic Signature of Signing Officer or Director

Date