


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000074180 1. Entity Name CANTER AND COMPANY, INC.	
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Principal Place of Business 2120 NE 205TH ST N MIAMI BCH, FL 33179	Mailing Address 2120 NE 205TH ST N MIAMI BCH, FL 33179
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DO NOT WRITE IN THIS SPACE

03202004	No Chg-P	CR2E034 (10/03)
4. FEI Number 82-0558828	Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CANTER, SHERMAN
2120 NE 205TH ST
N MIAMI BCH, FL 33179**

**DO NOT WRITE
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 _____ (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

U00000102238
04/05/04-80007-011 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CANTER, SHERMAN 2120 NE 205TH ST N MIAMI BCH, FL 33179
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CANTER, FERN 2120 NE 205TH ST N MIAMI BCH, FL 33179
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IN THIS SPACE**

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: *Sherman Cantero* **4/1/04** **(305) 987-0129**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #