

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000075329

FILED
Apr 30, 2004
Secretary of State

Entity Name: AMERICAN DREAM CAPITAL CORPORATION

Current Principal Place of Business:

2804 LAND O'LAKES BLVD
LAND O'LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

2804 LAND O'LAKES BLVD
LAND O'LAKES, FL 34639

New Mailing Address:

FEI Number: 82-0554655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESKURAKIS, JOHN
25133 SEVEN RIVERS CIRCLE
LAND O LAKES, FL 34639 US

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: D () Delete
Name: DESKURAKIS, JOHN
Address: 25183 SEVEN RIVERS CIRCLE
City-St-Zip: LAND O LAKES, FL 34639

Title: P () Delete
Name: ZEMETRES, RITA
Address: 17815 SIMMONS ROAD
City-St-Zip: LUTZ, FL 33548

Title: D (X) Delete
Name: ZEMETRES, RONALD
Address: 17815 SIMMONS ROAD
City-St-Zip: LUTZ, FL 33548

Title: D () Delete
Name: GLEASON, CHRISTOPHER P
Address: 2804 LAND O'LAKES BLVD.
City-St-Zip: LAND O'LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN DESKURAKIS

D

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date