


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 06, 2004 8:00 am**  
**Secretary of State**

08-06-2004 90004 008 \*\*\*150.00

54067252

<b>DOCUMENT # P02000081271</b> 1. Entity Name <b>PERMANEL, INC.</b>					
Principal Place of Business <b>6580 SEMINOLE BLVD, LOT 502 SEMINOLE, FL 33772</b>			Mailing Address <b>6580 SEMINOLE BLVD, LOT 502 SEMINOLE, FL 33772</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>02-0636336</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> <b>PEDRO MARIRO</b> <b>6580 SEMINOLE BLVD, LOT 502</b> <b>4TH FLOOR</b> <b>MIAMI, FL 33145</b>			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>SEMINOLE</b> <b>FL</b> Zip Code <b>33772</b>		
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 <b>PEDRO MARINO</b> <i>[Signature]</i> DATE <b>8/4/04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 8, 2004</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSD</b> <b>MARINO, PEDRO</b> <b>6580 SEMINOLE BLVD, LOT 502</b> <b>SEMINOLE, FL 33772</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>RUBIANO, MARIA E</b> <b>6580 SEMINOLE BLVD, LOT 502</b> <b>SEMINOLE, FL 33772</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>[Signature]</i> <b>8/4/04 (727) 686-80</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

PEDRO MARINO

Attachment  
# 02000081271

54067252

(727) 821-6278

Fax (727) 565-0126

Irving B. \_\_\_\_\_  
Bernheim, CPA, PA

735 Arlington Avenue North

Suite 104

St. Petersburg, FL 33701

August 4, 2004

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: PERMANEL, INC.  
Document # P02000081271

Dear Sir or Madam:

I am writing at the request of corporation named above.

Enclosed is a check for \$150, representing the annual report fee for the year 2004.

We respectfully request that you not charge a penalty based upon reasonable cause: Mr. Pedro Marino, the president and sole employee was traveling out of the country for the last month and a half. Upon returning he immediately met with me. This is the first year the State of Florida did not mail out the annual report form, but sent out postcards instead. Mr. Marino did not discover the postcard until after the due date had elapsed. The company was incorporated in 2002, and this is only the second filing of the report. Mr. Marino was not aware of the deadline and the large penalty. The late filing is not the result of any willful actions or intent.

Thank you for your consideration in this matter.

Yours very truly,

*Irving Bernheim*

Irving Bernheim

RECEIVED  
DIVISION OF CORPORATIONS  
UNIFORM BUSINESS REPORT FILINGS  
P.O. BOX 1500  
TALLAHASSEE, FL 32302-1500  
AUG 10 2004