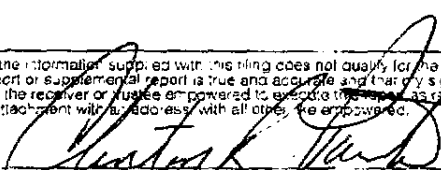


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000089063																																		
1. Entity Name PNTR ENTERPRISES, INC.																																		
Principal Place of Business 3426 PALLADIAN CIRCLE DEERFIELD BEACH FL 33442		Mailing Address 3426 PALLADIAN CIRCLE DEERFIELD BEACH FL 33442																																
DO NOT WRITE IN THIS SPACE																																		
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		 042820C4 No Chg-F CR2E034 (10/03) 4. FEI Number 01-0741064 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required Applied For Not Applicable																																
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 _____ DATE _____ Signature typed and printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when fee is waived)																																		
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																																
10. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>PTD</td> </tr> <tr> <td>NAME</td> <td>PAINTER, CLINTON R</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3426 PALLADIAN CIRCLE</td> </tr> <tr> <td>CITY, ST, ZIP</td> <td>DEERFIELD BEACH, FL 33442</td> </tr> <tr> <td>TITLE</td> <td>VSD</td> </tr> <tr> <td>NAME</td> <td>PAINTER, MARIE G</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3426 PALLADIAN CIRCLE</td> </tr> <tr> <td>CITY, ST, ZIP</td> <td>DEERFIELD BEACH, FL 33442</td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td></td> </tr> </table>		TITLE	PTD	NAME	PAINTER, CLINTON R	STREET ADDRESS	3426 PALLADIAN CIRCLE	CITY, ST, ZIP	DEERFIELD BEACH, FL 33442	TITLE	VSD	NAME	PAINTER, MARIE G	STREET ADDRESS	3426 PALLADIAN CIRCLE	CITY, ST, ZIP	DEERFIELD BEACH, FL 33442	TITLE		NAME		STREET ADDRESS		CITY, ST, ZIP		TITLE		NAME		STREET ADDRESS		CITY, ST, ZIP		DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 507, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with full address, with all other fee empowered.																																		
SIGNATURE: 		4-28-04 954-815-7555 Date Day and Phone #																																