

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096175

**FILED**  
**Mar 13, 2004**  
**Secretary of State**

**Entity Name:** SUMMERTRUST INVESTMENTS, INC.

**Current Principal Place of Business:**

1500 SAN REMO AVE., STE. 177  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

3952 PINWOOD LANE  
WESTON, FL 33331

**Current Mailing Address:**

1500 SAN REMO AVE., STE. 177  
CORAL GABLES, FL 33146

**New Mailing Address:**

3952 PINWOOD LANE  
WESTON, FL 33331

**FEI Number:** 55-0795373

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FENWARTH, OTTO  
3952 PINWOOD LN.  
FORT LAUDERDALE, FL 33331

**Name and Address of New Registered Agent:**

FENWARTH, OTTO  
3952 PINWOOD LN.  
WESTON, FL 33331

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

03/13/2004

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FENWARTH, OTTO  
Address: 3952 PINWOOD LN.  
City-St-Zip: WESTON, FL 33331

Title: D ( ) Delete  
Name: PUYANA, MARIA M  
Address: 3952 PINWOOD LN.  
City-St-Zip: WESTON, FL 33331

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D ( ) Change (X) Addition  
Name: PUYANA, SILVIA L  
Address: 3952 PINWOOD LN.  
City-St-Zip: WESTON, FL 33331

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: OTTO FENWARTH

D

03/13/2004

Electronic Signature of Signing Officer or Director

Date