

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096542

FILED
Sep 08, 2004
Secretary of State

Entity Name: FLORIBBEAN MARKETING & INVESTMENTS INC

Current Principal Place of Business:

12950 W. COLONIAL
WINTER GARDEN, FL 34787

New Principal Place of Business:

12950 WEST COLONIAL
WINTER GARDEN, FL 34787

Current Mailing Address:

12950 W. COLONIAL
WINTER GARDEN, FL 34787

New Mailing Address:

12950 WEST COLONIAL
WINTER GARDEN, FL 34787

FEI Number: 14-1863534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHALENDAR, MOMAN
12950 W. COLONIAL DR.
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

SHALENDAR MOMAN
12950 WEST COLONIAL DRIVE
WINTER GARDEN, FL 34787 US

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: SHALENDAR MOMAN

09/08/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOMAN, SHALENDAR
Address: 12950 W. COLONIAL DR.
City-St-Zip: WINTER GARDEN, FL 34787

Title: V (X) Delete
Name: SERMON, CHERYL
Address: 1730 BENT WAY COURT
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SHALENDAR MOMAN

P

09/08/2004

Electronic Signature of Signing Officer or Director

Date