

# 2004-FOR PROFIT CORPORATION ANNUAL REPORT

04-13-2004 90007 034 \*\*\*150.00

P02000116295

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

54032139



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<b>DOCUMENT # P02000116295</b> 1. Entity Name <b>WING KING FOUR, INC.</b>					
Principal Place of Business <b>5510 W LASALLE ST, STE 200 TAMPA, FL 33607</b>			Mailing Address <b>5510 W LASALLE ST, STE 200 TAMPA, FL 33607</b>		
2. Principal Place of Business <b>210 S. Kings Ave</b> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <b>210 S. Kings Ave</b> <small>Suite, Apt. #, etc.</small>			
City & State <b>Brandon, FL</b> <small>Zip</small> <b>33511</b>		City & State <b>Brandon, FL</b> <small>Zip</small> <b>33511</b>		4. FEI Number <b>03-0499101</b>	
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE MIAMI, FL 33131</b>			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<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>D MELLODY, JEANETTE</b> <b>5510 W LASALLE ST, STE 200</b> <b>TAMPA, FL 33607</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>J.J. Massaro</b> <b>6119 Kingbird Manor Dr.</b> <b>Lithia, FL 33547</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>See attached list</b>	
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)(f), 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: <u>J.J. Massaro</u>			J.J. MASSARO		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4-3-04 (813) 376-3875		



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BOUVIER ASSOC

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**BOUVIER & ASSOCIATES**  
CERTIFIED PUBLIC ACCOUNTANTS

3210 N. Wickham Road, Suite 5 • Melbourne, Florida 32935  
Tel. 321/ 752-9967 • Fax 321/ 752-9927

August 17, 2004

Florida Department of State  
Attn: Tina Roberts  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Document # P02000116295

Tina:

Per your instructions, I am faxing this letter to you on our client's behalf. Wing King IV, Inc., originally mailed in their Annual Report with check number 2526 for \$150.00, which cleared April 7, 2004. The Annual Report was returned to our client with a letter requesting we identify the each officer's title. This was completed and mailed back on April 23, 2004. Per our conversation today, this information was not received by your office.

Please see the officers and their corresponding titles listed below.

J. J. Massaro, President  
6119 Kingbird Manor Drive  
Lithia, Florida 33547

James Mellody Jr., Vice President  
210 S. Kings Avenue, Suite A  
Brandon, Florida 33511

Scan Mellody, Secretary  
210 S. Kings Avenue, Suite A  
Brandon, Florida 33511

Peter Marchese, *Treas*  
P. O. Box 2571  
Brandon, Florida 33509

Should you have any questions regarding this information or need further information, please do not hesitate to contact our office.

Thank you for your assistance in this matter.

Sincerely,

Denise Arnold  
Office Administrator