## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Aug 18, 2004 8:00 am Secretary of State

DOCUMENT # P02000122338 08-18-2004 90001 026 \*\*\*150.00 1. Entity.Name . NESS, INC. Mailing Address CAGOGUPG 9133 BOCA GARDENS CIRCLE S-C BOCA RATON, FL 33496

Principal Place of Business 9133 BOCA GARDENS CIRCLE S-C BOCA RATON, FL 33496 07062004 Chg-P CR2E034 (10/03) 4. FEI Number Applied For 16-1648195 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOSEPH K. NOFIL, P.A. Street Address (P.O. Box Number is Not Acceptable) 3284 NORTH STATE, RD. 7 LAUDERDALE LÄKES, FL 33319 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, rypod or princed name of registered agent and little if applicable (NOTE: Recisioned Agent sonarion received when reinstatical DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change **PSTD** TITLE Delete TITLE Addition SHORE, CHAIM NAME NAME 9133 BOCA GARDENS CIRCLE S-C STREET ADDRESS STREET ADORESS BOCA RATON, FL 33496 CHY-ST-ZiP CITY-ST. 7iP ☐ Delate TITLE THE NAME MAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP @17-81-7P ☐ Delete THE Channe Addition HILL NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZiP CITY-ST-7/P Change Addition ☐ Delote TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition THUE NAME STREET ADDRESS 《共主》名D/在58 CITY-ST-ZiP CHY-ST-ZF Change Addition TITLE Delete TITLE MAM MARKE STREET ADDRESS STREET AODRESS CITY-ST-ZIP CITY - ST-ZIP 12. I hereby certify that the information supplied with this filling 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 frue 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 truttee 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 all other like empowered

SIGNATURE:

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Davistia Phona #

Attachment 54068625

## Ness, Inc. 445 S Federal Hwy Delray Beach, FL 33483 (561) 274-9016

August 16th, 2004

Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302

RE: 🤇

P02000122338

Dear Officer:

Please be advised that we did not received the renewal notice for 2004. We are now submitting the UBR 2004, along with a check for \$150.00 due in order to renew the corporation for this year. We are now updating the our new address. Please waive all the penalties due to the fact that we did not receive the renewal notice, and update your files accordingly.

Please contact us if you need any additional information.

Sincerely,

Chaim Shore

Chaim Shore President