

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009075

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: LOBBY ENTERPRISE, CORP.

## Current Principal Place of Business:

6211 BUENA VISTA DRIVE  
MARGATE, FL 33063

## New Principal Place of Business:

## Current Mailing Address:

6211 BUENA VISTA DRIVE  
MARGATE, FL 33063

## New Mailing Address:

FEI Number: 03-0502110

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIBAS, ANTONIO  
6211 BUENA VISTA DRIVE  
MARGATE, FL 33063 US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RIBAS, ANTONIO O  
Address: 3131 W BUENA VISTA DR.  
City-St-Zip: MARGATE, FL 33063

Title: VD ( ) Delete  
Name: MONTEIRO, LUIZ  
Address: 6211 BUENA VISTA DRIVE  
City-St-Zip: MARGATE, FL 33063

Title: TD ( ) Delete  
Name: CASTRO, GIOVANA  
Address: 8341 ROYAL PALM BLVD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD ( ) Delete  
Name: SCIAUDONE, DIANA  
Address: 1416 NE 4TH COURT  
City-St-Zip: FT. LAUDERDALE, FL 33301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANTONIO RIBAS

PD

04/27/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date