# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**
**Mar 31, 2004 8:00 am**
**Secretary of State**

03-12-2004 90018 046 ***150.00

DOCUMENT # P03000009076

1. Entity Name
ACTS INTERNATIONAL, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 1401 EAST BROWARD BOULEVARD<br>SUITE 300<br>FORT LAUDERDALE FL 33301 | 1401 EAST BROWARD BOULEVARD<br>SUITE 300<br>FORT LAUDERDALE FL 33301 |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 2011 S. Perimeter Rd. | 2011 S. Perimeter Rd. |
| Suite, Apt. #, etc.: Suite C | Suite, Apt. #, etc.: Suite C |
| City & State: Fort Lauderdale, FL | City & State: Ft. Lauderdale, FL |
| Zip: 33309 Country: Broward | Zip: 33309 Country: Broward |

MOORE CR2E034 (11/03)

4. FEI Number: 05-0550411 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| J. PATRICK DYAL<br>1401 EAST BROWARD BOULEVARD<br>SUITE 300<br>FORT LAUDERDALE FL 33301 | Name: Hannes Jagerhofer<br>Street Address (P.O. Box Number is Not Acceptable): 2011 South Perimeter Rd. Ste C<br>City: Fort Lauderdale FL Zip Code: 33309 |

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 _____ DATE 3/25/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2004 Fee will be $550.00**
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|
| TITLE | PD ☐ Delete | TITLE | PD ☑ Change ☐ Addition |
| NAME | JAGERHOFER, HANNES | NAME | Jagerhofer, Hannes |
| STREET ADDRESS | 6550 NORTH FEDERAL HWY #240 | STREET ADDRESS | 2011 South Perimeter Rd., Suite C |
| CITY-ST-ZIP | FORT LAUDERDALE FL 33308 | CITY-ST-ZIP | Fort Lauderdale, FL. 33309 |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
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| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

12. I hereby certify that the information supplied with this filing 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 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:** _____ 3/25/04 954-776-4200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #