


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Oct 01, 2004 8:00 am**  
**Secretary of State**

10-01-2004 90001 043 \*\*\*150.00

<b>DOCUMENT # P03000010609</b>	
1. Entity Name ABRITT PUBLISHING GROUP, INC.	

Principal Place of Business 13484 SW 144 TER MIAMI, FL 33186	Mailing Address 13484 SW 144 TER MIAMI, FL 33186
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**54073797**



2. Principal Place of Business 13484 SW 144 TER Suite, Apt. #, etc.	3. Mailing Address 13484 SW 144 TER Suite, Apt. #, etc.
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09212004 Chg-P CR2E034 (10/03)

City & State MIAMI, FL Zip 33186 Country USA	City & State MIAMI, FL Zip 33186 Country USA
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4. Fee Number 830348068	Applied For Not Applicable
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6. Name and Address of Current Registered Agent ROBEY, DAN 13484 SW 144 TER MIAMI, FL 33186	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBEY, DAN 13484 SW 144 TER MIAMI, FL 33186 <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
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
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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)(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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
9/27/04 3052381356  
Date Daytime Phone #

Attachment

54073797  
# P03000010609

9/27/04

To: Division of Corporations


Fm: Abritt Publishing Group

Please note that we did not receive prior late notice for  
filing of annual report.

Best Regards

Dan Robey  
Registered Agent  
Abritt Publishing Group

X

A handwritten signature in black ink, appearing to read 'Dan Robey', is written over a horizontal line.