

2004 FOR PROFIT CORPORATION ANNUAL REPORT

3/29

FILED
Apr 27, 2004 8:00 am
Secretary of State

03-29-2004 90075 029 ***150.00

DOCUMENT # P03000019877																													
1. Entity Name ANSELMO ENTERPRISES, INC.																													
Principal Place of Business 908 SW 17TH ST FT LAUDERDALE, FL 33315			Mailing Address 908 SW 17TH ST FT LAUDERDALE, FL 33315																										
2. Principal Place of Business			3. Mailing Address																										
Suite, Apt. #, etc.			Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		Zip																									
4. Name and Address of Current Registered Agent ANSELMO, DARREN 908 SW 17TH ST FT LAUDERDALE, FL 33315				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when replacing) Signature, typed or printed name of registered agent who file it applicable. DATE																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			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																										
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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: *Darren Anselmo* **954-240-2543**
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR Date Daytime Phone #

Darren Anselmo

4/14/04 CORRECTED