

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025637

FILED  
May 04, 2004  
Secretary of State

Entity Name: SWEEPING BEAUTIES OF THE PALM BEACHES, INC.

## Current Principal Place of Business:

7622 SIERRA RIDGE LN  
LAKE WORTH, FL 33463

## New Principal Place of Business:

13307 DRYSDALE AVENUE  
PORT CHARLOTTE, FL 33981

## Current Mailing Address:

7622 SIERRA RIDGE LN  
LAKE WORTH, FL 33463

## New Mailing Address:

13307 DRYSDALE AVENUE  
PORT CHARLOTTE, FL 33981

FEI Number: 13-4241793

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLT, WAYNE  
7622 SIERRA RIDGE LN  
LAKE WORTH, FL 33463

## Name and Address of New Registered Agent:

PETERSON, DEBORAH  
13307 DRYSDALE AVENUE  
PORT CHARLOTTE, FL 33981

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: DEBORAH PETERSON

05/04/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PETERSON, DEBBIE  
Address: 7622 SIERRA RIDGE LN  
City-St-Zip: LAKE WORTH, FL 33463

Title: V (X) Delete  
Name: SOROKO, JOANNE  
Address: 7622 SIERRA RIDGE LN  
City-St-Zip: LAKE WORTH, FL 33463

Title: S (X) Delete  
Name: HOLT, WAYNE  
Address: 7622 SIERRA RIDGE LN  
City-St-Zip: LAKE WORTH, FL 33463

## 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:

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: DEBORAH PETERSON

P

05/04/2004

Electronic Signature of Signing Officer or Director

Date