

2004 FOR PROFIT CORPORATION ANNUAL REPORT

4/12/20

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-12-2004 90267 017 ***150.00

DOCUMENT # P03000026618

1. Entity Name
CAB MARKETING, INC.



Principal Place of Business
6388 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH, FL 33463

Mailing Address
6388 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH, FL 33463

66417424



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03042004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

13-4243422

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$650.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PSTD
ANNUNZIATA, LAURA E
6388 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH, FL 33463

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change

☐ Addition

TITLE
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CITY- ST- ZIP

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TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change

☐ 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: *Laura Annunziata* LAURA ANNUNZIATA

3-5-04

(Seal) 655-9518

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

66417424

Attachment



Florida Profit

CAB MARKETING, INC.

PRINCIPAL ADDRESS

6388 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH FL 33463

MAILING ADDRESS

6388 SHADOW CREEK VILLAGE CIRCLE
LAKE WORTH FL 33463Document Number
P03000026618State
FLFEI Number
NONEStatus
ACTIVEDate Filed
03/06/2003Effective Date
NONE

Registered Agent

Name & Address
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145

Officer/Director Detail

Name & Address	Title
ANNUNZIATA, LAURA E 6388 SHADOW CREEK VILLAGE CIRCLE LAKE WORTH FL 33463	PSTD

Annual Reports

Report Year	Filed Date
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Attachment
Division of Corporations

660417424

2004 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	P03000026618
Business Entity Name	CAB MARKETING, INC.
Original File Date	03/06/2003

FEI Number	
Principal Address	6388 SHADOW CREEK VILLAGE CIRCLE LAKE WORTH, FL 33463
Mailing Address	6388 SHADOW CREEK VILLAGE CIRCLE LAKE WORTH, FL 33463
Registered Agent	SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US

Officer/Director Name And Address

PSTD LAURA E ANNUNZIATA 6388 SHADOW CREEK VILLAGE CIRCLE LAKE WORTH, FL 33463
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