

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000027609

FILED  
Sep 08, 2004  
Secretary of State

Entity Name: STYLIANI CORP

**Current Principal Place of Business:**

1554 PASADENA DR  
DUNEDIN, FL 34698

**New Principal Place of Business:**

3533 FAIRWAY FOREST DRIVE  
PALM HARBOR, FL 34685

**Current Mailing Address:**

1554 PASADENA DR  
DUNEDIN, FL 34698

**New Mailing Address:**

3533 FAIRWAY FOREST DRIVE  
PALM HARBOR, FL 34685

FEI Number: 20-0926581

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KANDARAKIS, MARY  
2438 ENTERPRISE ROAD  
2604  
CLEARWATER, FL 33763 US

**Name and Address of New Registered Agent:**

KANDARAKIS, MARY  
3533 FAIRWAY FOREST DRIVE  
PALM HARBOR, FL 34685 US

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:

Electronic Signature of Registered Agent

09/08/2004

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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Change (X) Addition  
Name: KANDARAKIS, MARY  
Address: 3533 FAIRWAY FOREST DRIVE  
City-St-Zip: PALM HARBOR, FL 34685

Title: V ( ) Change (X) Addition  
Name: WISEMAN, KENNETH E  
Address: 3533 FAIRWAY FOREST DRIVE  
City-St-Zip: PALM HARBOR, FL 34685

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: MARY KANDARAKIS

Electronic Signature of Signing Officer or Director

P

09/08/2004

Date