2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000027942

FILED May 10, 2004 8:00 am Secretary of State 04-23-2004 90216 005 ***150.00

Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State A FEI Number Index Applied For Index App	•	e of Business ISLAND ROAD 33321	Mailing Address 7247 N PINE ISLAND TAMARAC, FL 33321	ROAD		(CROTTO IN A		0632	FITO(() /BO)
City & State City & City & State City & City & State City & State City & State City & City & St	. Principal Pi	lace of Business	3. Mailing Address						
Box Applicable Box	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01142004	Chg-PCl	R2E034.(10/03)	<u> </u>
8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) To City FL Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida. I am ternilar with, and accept the obligations of registered agent. IGNATURE Dignort have or protest wine or implement agent and the 3 applicates NOTE Registered Agent extends in the State of Forida. I am ternilar with, and accept the obligations of registered agent. IGNATURE Dignort have or protest wine or implement agent and the 3 applicates NOTE Registered Agent extends in the State of Forida. I am ternilar with, and accept the obligations of registered agent. INCITE Registered Agent. OATE FL Zip Code OATE To Descriptions of registered agent. OATE T	_City.& State	9	City & State				770640		
Name Street Address (P.O. Box Number is Not Acceptable) City FL Zin Code File Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FIle City FL Zin Code FIle City FL Zin Code FIle Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FIle City FL Zin Code FIle Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FIle Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code Florida. I am familiar with, and accept Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FIle Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FILE Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FILE Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FILE Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FILE Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code Address (P.O. Box Number is Not Acceptable) DATE City FL Zin Code FILE Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Count	lry	5. Certificate	of Status Desired		
Street Address (P.O. Box Number is Not Acceptable) TLAUDERDALE, FL City FL Zip Code The above runned 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. (GNATURE Sequent here or proteor rame or registered agent at this is approach. Synchronic proteor rame or registered agent at this is approach. (GNATURE) Sequent here or proteor rame or registered agent at this is approach. Sequent here or proteor rame or registered agent. (HOTE Registered Agent stokes for registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. (GNATURE) Sequent here or proteor rame or registered agent at this is approach. Sequent here or proteor rame or registered agent. (HOTE Registered Agent stokes for registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent. (GNATURE) Sequent here or proteor rame or registered agent. (HOTE Registered Agent stokes for registered agent, or both, in the State of Florida. I am familiar with, and accept agent a		6. Name and Address of Curre	nt Registered Agent			7. Name and	Address of New Regist	ered Agent	
TLAUDERDALE, FL City FL Zip Code The above named onlity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forlida. I am familiar with, and accept the obligations of registered agent. Separate fined or prizor name of registered agent and 1813 agestacions. (NOTITUE) Separate fined or prizor name of registered agent and 1813 agestacions. (NOTITUE) Separate fined or prizor name of registered agent and 1813 agestacions. (NOTITUE) Separate fined or prizor name of registered agent and 1813 agestacions. (NOTITUE) Separate fined or prizor name of registered agent and 1813 agestacions. (NOTITUE) Separate fined or prizor name of registered agent. (NOTITUE) Separate fined or prizor name of registered agent. (NOTITUE) Separate fined or prizor name of registered agent. (NOTITUE) Separate fined or prizor name of registered agent. (NOTITUE) SEPARATE FINED STATE (NOTITUE) Detection Campaign Finencing Fine fined or prizor name of registered agent. (NOTITUE) SEPARATE FINE (NOTITUE) Detection Campaign Finencing SEPARATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Addition of the prizor name of registered agent. (NOTITUE) MARK SEPARATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IN ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Addition of the prizor name of registered agent. (NOTITUE) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Addition of the prizor name of registered agent. (NOTITUE) Change Addition of the purpose of the purpose of registered agent. (NOTITUE) (NOTI					L	(P.O. Box Numbe	r is Not Acceptable)		-
The above named onlity 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. IGNATURE Sonata hood or proteon name of implatered agent and till of expectable. INDEE Registered Agent SONATA in providing the proteon name of implatered agent and till of expectable. INDEE Registered Agent SONATA in providing the proteon name of implatered agent and till of expectable. INDEE Registered Agent SONATA in providing the proteon name of implatered agent and till of expectable. INDEE Registered Agent SONATA in providing the pro					J. J				
The obligations of registered agent. IGNATURE				}	City			FL Zip Coo	te
FILE NOWILL FEE. IS \$150.00 After May 1, 2004 Fee will be \$550.00 O OFFICERS AND DIRECTORS IT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MENDEZ, FABIOLA TITLE MARE TREE HOORSS TITLE ST. 33321 THE MARE TREE HOORSS TITLE HOORSS T	. The above	named entity submits this statement	t for the purpose of changing it	s registere	ed office or regist	ered agent, or bott	h, in the State of Florida.	I am familiar with.	and accept
Signals inhed or printer dame of incystered agent and \$184 in applicable. (NOTE: Redefined Apent signals rice, inclusive, reprint sinch resultance) After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MENDEZ, FABIOLA TAMARAC, FL 33321 Delete ITILE MERET ADDRESS TOTY-ST-2P TILE MERET ADDRESS TOTY-ST-2P		tions of registered agent.			and the				
After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.		Signature, typed or printer name of registered ag	ont and tile il applicable (NC	TE: Registered	d Access diction and are air	red when rensisting)	+ .	DATE	
TILE D Delete De					- Pages it september in the				
ME ME ME MEDEZ, FABIOLA TY-S1-7IP TRE MARAC, FL 33321 Delete TITLE MARE MARE MEET ADDRESS TY-S1-7IP TLE MARE MARE MARE MARE MARE MARE MARE MAR	After Ma	ay 1, 2004 Fee will be \$55	0.00 Trust Fund Co	aign Finan	ncing _ \$	5.00 May Be			£
IREET ADDRESS TY-ST-2P TAMARAC, FL 33321 TILE THE TAMARAC, FL 33321 TILE TREET ADDRESS TREET ADDRESS TRY-ST-2P TILE TREET ADDRESS TY-ST-2P TILE THE TAME TY-ST-2P TILE TY-ST-2P TY-ST-	After Ma	ay 1, 2004 Fee will be \$55 OFFICERS AF	0.00 Trust Fund Co	aign Finan ntribution.	icing S	5.00 May Be	CHANGES TO OFFICER		
TREE Delete TITLE Change Addition TREET ADDRESS TY-ST-ZIP TREET ADDRESS Change Addition TREET ADDRESS TY-ST-ZIP CHANGE TY-ST-ZIP CHANGE TY-ST-ZIP	After Ma	ay 1, 2004 Fee will be \$55 OFFICERS AF	0.00 Trust Fund Co	aign Finan ntribution.	ncing S!	5.00 May Be	CHANGES TO OFFICER		
MAME RREET ADDRESS TYT-ST-ZIP TILE Delete	O. TLE AME TREET ADDRESS	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD	0.00 Trust Fund Co	aign Finan ntribution. 11. IIILE NAME SIREI	Signal Ac	5.00 May Be	CHANGES TO OFFICER		
TILE AME TREET ADDRESS TREET ADDRESS TITY-ST-ZIP TILE AME TREET ADDRESS	O. ITLE AME TREET ADDRESS ITY-ST-ZIP	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD	Trust Fund Co	aign Finan ntribution. 11. ITTLE NAME SURE CITY	SE ET ADDRESS -ST-ZP	5.00 May Be	CHANGES TO OFFICER	☐ Change	Addition
AME TREET ADDRESS TY-5T-ZIP TILE Delete TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE Change Addition TREEL ADDRESS CITY-ST-ZIP TITLE Change Addition Addition TREEL ADDRESS CITY-ST-ZIP TITLE AME STREET ADDRESS CITY-ST-ZIP TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE AME STREET ADDRESS CITY-ST-ZIP TITLE AME STREET ADDRESS CITY-ST-ZIP TITLE AME STREET ADDRESS CITY-ST-ZIP TITLE AME STREET ADDRESS CITY-ST-ZIP TITLE AME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE AME STREET ADDRESS	O. ITLE AME IREET ADDRESS ITY-SI-ZIP TLE AME IREET ADDRESS	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD	Trust Fund Co	aign Finan ntribution. 11. IIILE NAME STREE CITY- TITLE NAME STREE	SE EF ADDRESS -ST-ZIP	5.00 May Be	CHANGES TO OFFICER	☐ Change	Addition
TILE CHANGE ADDRESS TITLE ADDRESS	After Ma O. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD	Trust Fund Co	aign Finan ntribution. 11. ITTLE NAME STREI CITY FILE NAME STREE CITY	SE ET ADDRESS -ST-ZIP	5.00 May Be	CHANGES TO OFFICER	☐ Change	Addition
MAME IRSEI ADDRESS ITY-ST-ZIP ITLE AME IRSEI ADDRESS CITY-ST-ZIP ITLE AME IRSEI ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	O. TILE MME TREET ADDRESS TITY-ST-ZIP- TILE AME TREET ADDRESS TITY-ST-ZIP TILE AME TITE TI	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD	Trust Fund Co	aign Finan ntribution. 11. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	5.00 May Be	CHANGES TO OFFICER	☐ Change	Addition
IREEI ADDRESS ITY-ST-ZIP ITLE AME AME ITHE AME ITHE I	O. TILE AME IRRET ADDRESS ITY-ST-ZIP- TILE AME IRRET ADDRESS ITY-ST-ZIP TILE AME IRRET ADDRESS ITY-ST-ZIP TILE AME IRRET ADDRESS	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD	Trust Fund Co	aign Finan ntribution. 11. TITE NAME STREE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE STREE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS	5.00 May Be	CHANGES TO OFFICER	☐ Change	Addition
TILE Change Addition AME TREET AUDRESS TREET AUDRESS CITY-ST-ZIP TILE AME AME AME AME TREET ADDRESS CITY-ST-ZIP TO Delete TITLE AME AME AME STREET ADDRESS STREET ADDRESS STREET ADDRESS	After Ma O. TILE MME IREET ADDRESS ITY-ST-ZIP- TILE AME IREET ADDRESS ITY-ST-ZIP TILE AME IREET ADDRESS ITY-ST-ZIP TILE IREET ADDRESS ITY-ST-ZIP TILE ITY-ST-ZIP	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD TAMARAC, FL 33321	Trust Fund Co	aign Finan ntribution. 11. TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE TITLE TITLE TITLE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP	5.00 May Be	CHANGES TO OFFICER	☐ Change	Addition Addition
TREET ADDRESS ITY- ST-ZIP TILE AME AME TREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	O. ITTLE AME IREET ADDRESS ITY-ST-ZIP- ITTLE AME ITY-ST-ZIP ITTLE AME ITY-ST-ZIP ITTLE AME ITY-ST-ZIP ITTLE AME ITTLE	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD TAMARAC, FL 33321	Trust Fund Co	algn Finan 11. TITLE NAME STREE CITY	E ET ADDRESS -ST-ZIP E ADDRESS -ST-ZIP E ADDRESS -ST-ZIP E ADDRESS -ST-ZIP ET ADDRESS	5.00 May Be	CHANGES TO OFFICER	☐ Change	Addition Addition
ITY-ST-ZIP CITY-ST-ZIP TILE IAME IMAGE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZI	After Mi O. ITTLE AME ITTREET ADDRESS ITY-ST-ZIP- ITTLE AME ITY-ST-ZIP ITTLE AME ITY-ST-ZIP ITTLE AME ITTLE ITTLE	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD TAMARAC, FL 33321	Trust Fund Co	algn Finan 11. TITLE NAME STREE CITY TITLE TIT	E ET ADDRESS -ST-ZIP	5.00 May Be	CHANGES TO OFFICER	Change	Addition Addition Addition
NAME STREET ADDRESS STREET ADDRESS	After Mi O. TILE AME REET ADDRESS TY-ST-ZIP TILE AME TREET ADDRESS TY-ST-ZIP TILE TIL	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD TAMARAC, FL 33321	Trust Fund Co	algn Finan ntribution. 11. TITLE NAME STREE CITY-	SE ET ADDRESS -ST-ZIP EE TADDRESS -ST-ZIP EE TADDRESS -ST-ZIP EE TADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP	5.00 May Be	CHANGES TO OFFICER	Change	Addition Addition Addition
TREET ADORESS STREET ADORESS	After Mi O. TILE MME IREET ADDRESS TV-ST-ZIP TILE MME IREET ADDRESS TY-ST-ZIP TILE MME TILE MME TILE MME TILE MME TILE MME TILE MME TILE TILE MME TILE TILE MME TILE TILE MME TILE TILE TILE TILE AME TILE TILE AME TILE	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD TAMARAC, FL 33321	Trust Fund Co	aign Finan ntribution. 11. TITLE NAME STREI CITY- TITLE NAME STREI STRE	SE ET ADDRESS -ST-ZIP E ET ADDRESS	5.00 May Be	CHANGES TO OFFICER	Change	Addition Addition Addition
	After Mi O. ITTLE AAME IRREIT ADDRESS ITY-ST-ZIP- ITTLE AAME ITHER ADDRESS ITY-ST-ZIP ITTLE AAME ITHEREIT ADDRESS ITY-ST-ZIP ITTLE AAME ITHEREIT ADDRESS ITY-ST-ZIP ITTLE IT	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD TAMARAC, FL 33321	Trust Fund Co	aign Finan ntribution. 11. ITTLE NAME STREI CITY TITLE NAME STREI CITY	SE ET ADDRESS -ST-ZIP ET ADDRESS	5.00 May Be	CHANGES TO OFFICER	Change Change Change	Addition Addition Addition
er er er	O. ITTLE AME IRREIT ADDRESS ITY-ST-ZIP- ITTLE AME IRREIT ADDRESS ITY-ST-ZIP ITTLE AME IRREIT ADDRESS ITY-ST-ZIP ITTLE AME ITTLE ITTLE	D MENDEZ, FABIOLA 7247 N PINE ISLAND ROAD TAMARAC, FL 33321	Trust Fund Co	aign Finan ntribution. 11. ITTLE NAME STREE CITY- TITLE NAME STREE CITY-	SE ET ADDRESS -ST-ZIP ET ADDRESS	5.00 May Be	CHANGES TO OFFICER	Change Change Change	Addition Addition Addition