

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 17, 2004 8:00 am**  
**Secretary of State**

03-17-2004 90021 002 \*\*\*150.00

<b>DOCUMENT # P03000030133</b>					
<b>1. Entity Name</b> PI & PA 2000, INC.					
<b>Principal Place of Business</b> 5156 NW 106TH AVENUE MIAMI, FL 33178			<b>Mailing Address</b> 5156 NW 106TH AVENUE MIAMI, FL 33178		
<b>2. Principal Place of Business</b> Suite, Apt. #, etc.			<b>3. Mailing Address</b> clo Mark Bernstein 2001 S University Dr. #K		
City & State			City & State <b>Davie FL</b>		
Zip		Country		Zip <b>33328</b> Country <b>USA</b>	
<b>6. Name and Address of Current Registered Agent</b> CASCARANO, FRANCISCO 5156 NW 106TH AVENUE MIAMI, FL 33178				<b>7. Name and Address of New Registered Agent</b> Name <b>Mark Bernstein</b> Street Address (P.O. Box Number is Not Acceptable) <b>2001 S University Dr. #K</b> City <b>Davie</b> State <b>FL</b> Zip Code <b>33328</b>	
<b>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.</b> SIGNATURE  DATE <b>2-27-04</b>					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> CASCARANO, FRANCISCO 5156 NW 106TH AVENUE MIAMI, FL 33178		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>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.</b>					
<b>SIGNATURE:</b>				Date <b>02/27/2004</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					