

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 APR 28 PM 12:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P03000033453

1. Entity Name  
CARE DESK CORPORATION



Principal Place of Business  
C/O SETH ENTIN GREENBERG TRAUIG PA  
1221 BRICKELL AVE  
MIAMI, FL 33131

Mailing Address  
C/O SETH ENTIN GREENBERG TRAUIG PA  
1221 BRICKELL AVE  
MIAMI, FL 33131

2. Principal Place of Business  
2730 SW 3rd Avenue

3. Mailing Address  
2730 SW 3rd Avenue

Suite, Apt. #, etc.  
Suite 204

Suite, Apt. #, etc.  
Suite 204

City & State  
Miami, FL

City & State  
Miami, FL

Zip  
33129

Country  
USA

Zip  
33129

Country  
USA

04212004 Chg-P CR2E034 (10/03)

4. FEI Number  
42-1597592

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

CORPDIRECT AGENTS, INC.  
103 N MERIDIAN ST. LOWER LEVEL  
TALLAHASSEE, FL 32301

## 7. Name and Address of New Registered Agent

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

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	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Director	Gabrielle Margreet Marsman	2730 SW 3rd Avenue	Miami, FL 33129	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
President	Gabrielle Margreet Marsman	2730 SW 3rd Avenue	Miami, FL 33129	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Secretary	Gabrielle Margreet Marsman	2730 SW 3rd Avenue	Miami, FL 33129	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Treasurer	Gabrille Margreet Marsman	2730 SW 3rd Avenue	Miami, FL 33129	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> 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:

Gabrielle Margreet Marsman

22-04-2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

305-854-5336