
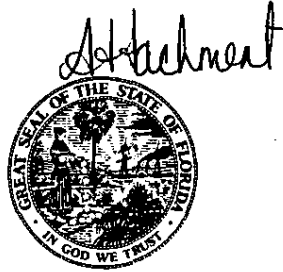


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-30-2004 90346 037 \*\*\*158.75

DOCUMENT # P03000034549					
1. Entity Name <b>ACCESSO GROUP, INC.</b>					
Principal Place of Business <b>18181 NE 31 COURT APARTMENT 1503 AVENTURA, FL 33160</b>			Mailing Address <b>18181 NE 31 COURT APARTMENT 1503 AVENTURA, FL 33160</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>FIN 11-3686138</b>	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>BLUM, SAMUEL S 2666 TIGERTAIL AVENUE SUITE 106 COCONUT GROVE, FL 33133</b>			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		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 _____ DATE _____					
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 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHELAN, JAMES R 18181 NE 31 COURT APT. 1503 AVENTURA, FL 33160 <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"/> 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"/> Delete		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"/> 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"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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: <u>James R. Whelan</u> <u>April 27, 2004</u> (305) 932-6372					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					



14015364

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 20, 2004

ACCESSO GROUP, INC.  
18181 NE 31ST CT., APT. 1503  
TOWER AT BISCAYNE COVE  
AVENTURA, FL 33160-2677

SUBJECT: ACCESSO GROUP, INC.  
Ref. Number: P03000034549

We have received your document for ACCESSO GROUP, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Eula Peterson  
Document Specialist

Letter Number: 304A00026064

Aventura.  
April 27, 2004

FRANKLY, I AM PERPLEXED. WHEN I FILED THE APPLICATION ON LINE, I GOT A MESSAGE SAYING IT HAD BEEN FILED SUCCESSFULLY.

HOWEVER, I DO NOT MAKE THE RULES - SIMPLY ATTEMPT TO COMPLY. AND SO, I AM HAPPY TO RETURN COMPLETED THE APPROVED FORM, TOGETHER WITH MY CHECK IN THE AMOUNT OF \$158.75 - AND DO SO IN THE VERY NICK OF TIME, SINCE I LEAVE THE COUNTRY TOMORROW AND WON'T BE BACK UNTIL MAY 22. SINCERELY,

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

En: ACCESSO GROUP, INC.