## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

#### Apr 16, 2004 8:00 am Secretary of State DOCUMENT # P03000040569 04-16-2004 90054 037 \*\*\*150 00 MASTER ESTATE SERVICES, INC. Principal Place of Business Mailing Address 3381 MYSTIC RIVER DR. NAPLES FL 34120 3381 MYSTIC RIVER DR. NAPLES FL 34120 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 48 130832 Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ಪ್ರಕರ್ಮಾಗ ನಿಜ್ಜಾಗಾಗ ಬಿ.ಎಲ್ಡೌಮ MEISTER, DAVID Street Address (P.O. Box Number is Not Acceptable) 3381 MYSTIC RIVER DR. NAPLES FL 34120 City Zio 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. Vp.u or printed name or registered agent and talls if applicable. 4-10-04 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Addition TITLE Delete NAME MIESTER, DAVID NAME 3381 MYSTIC RIVER DR. STREET ADDRESS STREET ADDRESS NAPLES FL 34120 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete\_ TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED

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# WRITTEN CONSENT TO ACTION BY THE DIRECTORS IN LIEU OF ANNUAL MEETING

The undersigned, being all of the Directors of Master Estate Services, Inc., a Florida Corporation, acting in accordance with Section 607.0821 of the Florida Business Corporation Act, hereby waive all notice of time, place or purpose of meeting and approve, adopt and take the following action by means of this written consent:

RESOLVED: That all contracts, acts, proceedings, elections and appointments which were made or taken by the Board of Directors and the Officers of the Corporation during the year be, and hereby are, ratified, approved, adopted and confirmed.

RESOLVED: That the financial report for the Corporation for the previous year is hereby ratified, approved, adopted and confirmed.

RESOLVED: That the following persons are hereby appointed to serve as officers of the Corporation, to hold the designated office or offices until the next Annual Meeting of the Board of Directors, or until his or her earlier resignation or removal, or until his or her successor is chosen and has qualified:

OFFICE

President Vice President Secretary Treasurer

Date: 4-10-04

NAME

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Director Director

Director

### SECRETARY'S CERTIFICATION

The undersigned, hereby certifies that he/she is the Secretary of the above-named Corporation and that the persons signing above are all of the Directors of said Corporation.

Secretary

Ottachment

WRITTEN CONSENT TO ACTION BY THE SHAREHOLDERS

#### IN LIEU OF ANNUAL MEETING

The undersigned, being all of the Shareholders of Master Estate Services, Inc., a Florida Corporation, acting in accordance with Section 607.0704 of the Florida Business Corporation Act, hereby waive all notice of time, place or purpose of meeting and approve, adopt and take the following action by means of this written consent:

RESOLVED: That all contracts, acts, proceedings, elections and appointments which were made or taken by the Board of Directors and the Officers of the Corporation during the year be, and hereby are, ratified, approved, adopted and confirmed.

RESOLVED: That the financial report for the Corporation for the previous year is hereby ratified, approved, adopted and confirmed.

RESOLVED: That the following persons are hereby elected to be the Directors of the Corporation, to serve until the first annual meeting of shareholders or until his or her successor is elected and qualifies or until his or her earlier resignation or removal:

Date: 4-10-04

Shareholder

Shareholder

#### SECRETARY'S CERTIFICATION

The undersigned, hereby certifies that he/she is the Secretary of the above-named Corporation and that the persons signing above are all of the Shareholders of said Corporation.

Secretary Marsh