


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2004 8:00 am
Secretary of State

07-28-2004 90024 021 ***150.00

DOCUMENT # P03000041786	
1. Entity Name THE DILLENERS INC	

Principal Place of Business 160 GARIBE CT WEST PALM BEACH, FL 33413 PA	Mailing Address 160 GARIBE CT WEST PALM BEACH, FL 33413 PA
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44050330



2. Principal Place of Business 160 Caribe CT	3. Mailing Address 160 Caribe CT
Suite, Apt. #, etc.	Suite, Apt. #, etc.

07092004 Chg-P CR2E034 (10/03)

City & State W. Palm Beach FL	City & State W. Palm Beach FL
Zip 33413	Zip 33413
Country	Country

4. FEI Number 27-0054115	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

6. Name and Address of Current Registered Agent KIELSING, ROBERT A 4793 N COGRESS AVE SUITE 206 BOYNTON BEACH, FL 33426	
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7. Name and Address of New Registered Agent Rick Rossano Street Address (P.O. Box Number is Not Acceptable) 160 Caribe CT City W. Palm Beach FL Zip Code 33413	
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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: Rick Rossano 7/12/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
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FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing \$5.00 May Be <input type="checkbox"/> Trust Fund Contribution. <input type="checkbox"/> Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE P	<input type="checkbox"/> Delete
NAME ROSSANO, RICK	
STREET ADDRESS 160 GARIBE CT	
CITY-ST-ZIP WEST PALM BEACH, FL 33413	
TITLE TRES	<input type="checkbox"/> Delete
NAME ANDERSON, GEORGE	
STREET ADDRESS 160 GARIBE CT	
CITY-ST-ZIP WEST PALM BEACH, FL 33413	
TITLE SEC	<input type="checkbox"/> Delete
NAME GONZALEZ, CHARLES	
STREET ADDRESS 160 GARIBE CT	
CITY-ST-ZIP WEST PALM BEACH, FL 33413	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Rossano, Rick	
STREET ADDRESS 160 Caribe CT	
CITY-ST-ZIP W. Palm Beach FL 33413	
TITLE Tres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Anderson, George	
STREET ADDRESS 160 Caribe CT	
CITY-ST-ZIP W. Palm Beach, FL 33413	
TITLE Sec	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Gonzalez, Charles	
STREET ADDRESS 160 Caribe CT	
CITY-ST-ZIP W. Palm Beach, FL 33413	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Rick Rossano SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	7/12/04 Date Daytime Phone #