## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000051167

Entity Name: COMMERCE SERVICES INTERNATIONAL, CORP.

FILED Jul 14, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3460 FOXCROFT RD STE 12-206 1750 N 17 CT MIRAMAR, FL 33025 **APT 202** 

HOLLYWOOD, FL 33020-225

**Current Mailing Address: New Mailing Address:** 

3460 FOXCROFT RD STE 12-206 1750 N 17 CT

MIRAMAR, FL 33025 **APT 202** 

HOLLYWOOD, FL 33020-285

**FEI Number:** FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUARTE, JOSE G DUARTE, JOSE G 3460 FOXCROFT RD STE 12-206 1750 N 17 CT

MIRAMAR, FL 33025 202 HOLLYWOOD, FL 33020-285

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.

SIGNATURE: JOSE G DUARTE 07/14/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition DUARTE, JOSE G DUARTE, JOSE G Name: Name:

3460 FOXCROFT RD STE 12-206 1750 N 17 CT #202 Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: HOLLYWOOD, FL 33020

Title: VD () Delete Title: VD (X) Change ( ) Addition Name: BRICENO, ANTONIO J Name: BRICENO, ANTONIO J

3460 FOXCROFT RD STE 12-206 Address: 1750 N 17 CT #202 Address: MIRAMAR, FL 33025 HOLLYWOOD, FL 33020 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE G DURATE PD 07/14/2004