2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000051176

FILED Apr 19, 2004 8:00 am Secretary of State 04-19-2004 90354 025 ***158.75

1. Entity Nam ATTENTU									
Principal Place	e of Business	Mailing Address				•	2404832	r	
4016 N.W. 6		4016 N.W. 62ND LANE				•	2404032	D	
CORAL SPRIN	IGS, FL 33067	CORAL SPRINGS, FL 33067	7						
t 						48 F. B.			
2. Principal P	.1. 1	1.1.1							
2080	rain Riage Bira	15080 Halm K	<u>iage b</u>	1Va					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	9		02242004	Chg-P	CR2E034 (10)/03)	
City & State	م ا	,	4. FEI Numbe	er		Арр	lied For		
Delra	y beach, FL	Delray Bear	~.,,,,		05-056	8093			Applicable
2221	R4 Country	1220 1 °	ountry'	A I	5. Certificate	of Status Desired		5. Addit	
6. Name and Address of Current Registered Agent					7. Name and	Address of New I		-	
				411	ENTI	5 1NIFE	STATENTO	30C	NI.IN
THEINOO, INC.				ddress (F	P.O. Box Number	er is Not Acceptable	e)	21~	
FORT LAUDERDALE, FL 33311				- A	~ () -	- 0		_	
	5	5080 PARM RIDGE BLUV.							
	City T	DECRAL BEACH FL ZIDCONGLISH							
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.	x. Shank				4/14/09	<u> </u>			
Signature, typed or punted name of registerity agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) . DATE /									
FIL	E NOW!!! FEE IS \$150.00	inancing	\$ 5.	00 May Be ed to Fees					
After Ma	ion.	Add	ed to Fees						
10.	11.		ADDITIONS	CHANGES TO OF	FICERS AND DIRE	CTORS	IN 11		
TITLE	PD	. Delete	TITLE	PD		-/0.15-/) X(:	hange	Addition
NAME	TAPIE, ALEXANDER		NAME	TA	PIE, AL	EXANDER MRIDGE B			
STREET ADDRESS CITY-ST-ZIP	4016 N.W. 62ND LANE		STREET ADDRESS CITY-ST-ZIP	50	80 PAL	MKIDGEE	32,18,1		
	CORAL SPRINGS, FL 33067			10E		EACH, FL	<i>_33484_</i> ⊠°		Addition
TITLE	FISCHER, SHARYN	,,	TITLE NAME		21150 4	HARYN	, ,	nange	☐ Addillion
STREET ADDRESS	4016 N.W. 62ND LANE		STREET ADDRESS	508	30 PALM	1 KIDGE 6	SLVD.		
CITY-ST-ZIP	CORAL SPRINGS, FL 33067		CITY-ST-ZIP	DE	LRAY B	EACH, FE	L <u>33484</u>	ļ	
TITLE	TD	☐ Delete	MILE	TN	,	·	Z(C	hange	" Addition
NAME	WISMANN, ANNE		NAME	WIS	MANN,	ANNE	U.VD.		
STREET ADDRESS CITY-ST-ZIP	4016 N.W. 62ND LANE		STREET ADDRESS CITY-ST-ZIP	508	SO PALM	1 KIVGB 0	2211211		
	CORAL SPRINGS, FL 33067			UEL	-KHY BE	ACH, FL		hange	Addition
TITLE NAME			TITLE NAME					пануе	
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

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

TITLE NAME

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

Delete

Delete

☐ Change

☐ Change

■ Addition

Addition