2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

1. Entity Nan	MENT # P0300005 GROUP INC.	1648				04-30-20	90375 040 *	**150.00
Principal Place of Business Mailing Address							*	
P.O. BOX 822483 PEMBROKE PINES, FL 33082		P.O. BOX 822483 PEMBROKE PINES, FL 33082				** / }		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04282004	Chg-P	CR2E034 (10/03)	
City & State		City & State		4. FEI Number 72 - 15	62783.	├	opplied For lot Applicable	
Zip -	Country	Zip	Coun	ntry	1 .	Status Desired _	ree Requir	iditional ed
	6. Name and Address of Curren	t Registered Agent		Nama	7. Name and A	ddress of New R	egistered Agent	
GONZALE	EZ, FERNANDO			Name	·,			
2532 SW 156TH AVE MIRAMAR, FL 33027			Street Address (P.O. Box Number is Not Acceptable)					
				0.1	/			,
			City			FL Zip Co		
the above	e named entity submits this statement i tions of registered agent.	for the purpose of changing its	s registere	ed office or registe	ered agent, or both,	in the State of Flo	rida. I am familiar with	, and accept
	Signature, typed or printed name of registered ager	nt and title if applicable. (NOT	TE: Registere	d Agent signature require	d when reinstating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550	9. Election Campa .00 Trust Fund Con			5.00 May Be ded to Fees			
After M	ay 1, 2004 Fee will be \$550 OFFICERS AND	.00 Trust Fund Con			ded to Fees	HANGES TO OFFI	CERS AND DIRECTOR	3S IN 11
After M	officers and	.00 Trust Fund Con	11.	Add	ded to Fees	HANGES TO OFFI	CERS AND DIRECTOR	
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2. I hereby certify that the information supplied with this filling does not quality 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 leg. elect 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 3 atutes; 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.