

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 02, 2004 8:00 am
Secretary of State

08-02-2004 90016 035 ***163.95

DOCUMENT # P03000089677

1. Entity Name

CSIP CONSULTING, INC.



Principal Place of Business

8515 BAY SHORE RD. #114
PALMETTO FL 34221

Mailing Address

PO BOX 446
ELLENTON FL 34222

2. Principal Place of Business

12938 Penn Station Ct.

Suite, Apt. #, etc.

101

3. Mailing Address

12938 Penn Station Ct.

Suite, Apt. #, etc.

101

City & State

ORLANDO, FL

City & State

ORLANDO, FL

Zip

32821

Country

USA

Zip

32821

Country

USA

4. FEI Number

D3-0526160

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HABER, LAWRENCE H ESQ.
606 FRONT STREET
CELEBRATION FL 34747-0171

7. Name and Address of New Registered Agent

Name

HABER, LAWRENCE H. ESQ.

Street Address (P.O. Box Number is Not Acceptable)

715 Bloom Street Suite 200A

City

Celebration

FL

Zip Code

34747

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

Lawrence H. Haber

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/29/04

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☒

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME SMITH, CINDY
STREET ADDRESS 8515 BAY SHORE ROAD #114
CITY-ST-ZIP PALMETTO FL 34221

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director/PRESIDENT/ST ☒ Change ☐ Addition
NAME Smith, Cindy Lee
STREET ADDRESS 12938 Penn Station Ct. #101
CITY-ST-ZIP ORLANDO FL 32821

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Cy Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/04

Date

941-720-1800
407-842-6175

Daytime Phone #