

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-30-2004 90294 019 \*\*\*150.00

DOCUMENT # P03000091213

1. Entity Name  
PEACE & LOVE ENTITY, INC.



Principal Place of Business  
4907 CARDER ROAD UNIT 4  
ORLANDO, FL 32810

Mailing Address  
4907 CARDER ROAD UNIT 4  
ORLANDO, FL 32810

24061682



2. Principal Place of Business  
5407 WIRLO BLANSON MEM HWY  
Suite, Apt. #, etc.  
BLD A 38

3. Mailing Address  
5407 WIRLO BLANSON HWY  
Suite, Apt. #, etc.  
BLD A 38

03252004 Chg-P CR2E034 (10/03)

City & State  
KISSIMMEE FL  
Zip  
34746

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KISSIMMEE FL  
Zip  
34746

4. 68-0563236 Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST  
4TH FLOOR  
MIAMI, FL 33145

7. Name and Address of New Registered Agent

Name  
BEN-AMOR HATEM  
Street Address (P.O. Box Number is Not Acceptable)  
5300 WARRIOR LANE  
City  
KISSIMMEE FL Zip Code  
34746

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 [Signature]  
Signature of registered agent or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE  
4/10/04

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME PSTD BEN-AMOR, HATEM ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP 4907 CARDER ROAD UNIT 4  
ORLANDO, FL 32810

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME PSTD BEN-AMOR HATEM ☒ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP 5300 WARRIOR LANE  
KISSIMMEE FL 34746

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

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

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

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

TITLE  
NAME ☐ Change ☐ Addition  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE  
4/10/04

Daytime Phone #