

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094583

FILED  
Apr 23, 2004  
Secretary of State

Entity Name: CAREFREE PROPERTIES INC.

## Current Principal Place of Business:

1301 ALTON ROAD  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

1029 5TH STREET  
MIAMI BEACH, FL 33139

## Current Mailing Address:

1301 ALTON ROAD  
MIAMI BEACH, FL 33139

## New Mailing Address:

1029 5TH STREET  
MIAMI BEACH, FL 33139

FEI Number: 20-0192929

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAROTTA, ANTHONY  
Address: 1301 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: BURTON, HARVEY  
Address: 1301 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MAROTTA, ANTHONY  
Address: 1029 5TH STREET  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change ( ) Addition  
Name: BURTON, HARVEY  
Address: 1029 5TH STREET  
City-St-Zip: MIAMI BEACH, FL 33139

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: ANTHONY MAROTTA

D

04/23/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date