2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094857

Entity Name: FERRA-STEPH PROPERTY MANAGEMENT PLUS INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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950 EGRET CIRCLE 77 EAST 4TH STREET

5304 212

DELRAY BEACH, FL 33444 HIALEAH, FL 33010

Current Mailing Address: New Mailing Address:

950 EGRET CIRCLE 77 EAST 4TH STREET 5304 212

5304 212 DELRAY BEACH, FL 33444 HIALEAH, FL 33010

FEI Number: 20-0185884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERRABONE, ILYA
950 EGRET CIRCLE
5304
DELRAY BEACH,, FL 33444 US
FERRABONE, ILYA
77 EAST 4TH STREET
212
HIALEAH,, FL 33010 US

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: 04/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 STEPHENS, PETER J
 Name:
 STEPHENS, PETER J

 Address:
 950 EGRET CIRCLE APT 5304
 Address:
 77 EAST 4TH STREET

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:
 HIALEAH, FL 33012

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 FERRABONE, ILYA
 Name:
 FERRABONE, ILYA

 Address:
 950 EGRET CIRCLE
 Address:
 77 EAST 4TH STREET

 City-St-Zip:
 DELRAY,, FL 33444
 City-St-Zip:
 HIALEAH,, FL 33010

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: PETER JAMES STEPHENS P 04/28/2004