2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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FILED
Apr 06, 2004 8:00 am
Secretary of State

02-25-2004 90021 040 ***158.75
04-06-2004 90025 017 ***158.75

MOORE CR2E034 (11/03)

DOCUMENT # P03000100983

1. Entity Name
OCEAN FRONT PLAZA, INC.

Principal Place of Business	Mailing Address
5575 A1A SOUTH SUITE#69 ST. AUGUSTINE FL 32084	240 NORTH SERENATA DRIVE VILLA #823 SOUTH PONTE VEDRA BEACH FL 32082

2. Principal Place of Business	3. Mailing Address
240 North Serenata ~~Beach~~	240 North Serenata DR
Suite, Apt. #, etc.: Drive VILLA# 823	Suite, Apt. #, etc.: VILLA# 823
City & State: South Ponte Vedra Beach, FL	City & State: South Ponte Vedra Beach, FL
Zip: 32082 Country: ST. Johns	Zip: 32082 Country: ST. Johns

4. FEI Number 47-0939825 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [x] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SARGIS, IKE 240 NORTH SERENATA DRIVE VILLA #823 SOUTH PONTE VEDRA BEACH FL 32082	Name: TISHIA ENDERS Street Address (P.O. Box Number is Not Acceptable): 240 North Serenata Drive VILLA #823 City: South Ponte Vedra Beach FL Zip Code: 32082

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: Tishia Enders as President of Ocean Front Plaza, Inc. 3-28-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. [ ] **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P [ ] Delete	TITLE	[ ] Change [ ] Addition
NAME	ENDERS, TISHIA M	NAME	
STREET ADDRESS	240 NORTH SERENATA DRIVE VILLA #823	STREET ADDRESS	
CITY-ST-ZIP	SOUTH PONTE VEDRA BEACH FL 32082	CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: Tishia Enders as President of Ocean Front Plaza 3-28-04 904 616-1002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Tishia Enders