

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000100988

Entity Name: SUMMER MOTE, INC.

FILED  
Mar 25, 2004  
Secretary of State

## Current Principal Place of Business:

1539 HARRISON STREET  
HOLLYWOOD, FL 33020

## New Principal Place of Business:

## Current Mailing Address:

1539 HARRISON STREET  
HOLLYWOOD, FL 33020

## New Mailing Address:

FEI Number: 20-0225904

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MOTE, SUMMER  
1539 HARRISON ST.  
HOLLYWOOD, FL 33020 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: PD ( ) Delete  
Name: MOTE, SUMMER  
Address: 1900 VAN BUREN ST #214  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MOTE, SUMMER  
Address: 1539 HARRISON ST  
City-St-Zip: HOLLYWOOD, FL 33020 US

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: SUMMER MOTE

MISS

03/25/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date