

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 22, 2004 8:00 am**  
**Secretary of State**

08-25-2004 90001 045 \*\*\*150.00  
08-04-2004 90014 009 \*\*\*\*\*8.75

<b>DOCUMENT # P03000117231</b> 1. Entity Name <b>PAKETDIENST CORP.</b>					
Principal Place of Business <b>870 SW 49 CIRCLE MARGATE, FL 33068</b>			Mailing Address <b>870 SW 49 CIRCLE MARGATE, FL 33068</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
<b>6. Name and Address of Current Registered Agent</b>  <b>ANDREU-REAL, URSULA</b> <b>870 SW 49 CIRCLE</b> <b>MARGATE, FL 33068</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
<b>8.</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <div style="text-align: right;"><small>DATE</small></div>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 8, 2004</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE	<b>DPST</b> <input type="checkbox"/> Delete <b>ANDREU-REAL, URSULA</b> <b>870 SW 49 CIRCLE</b> <b>MARGATE, FL 33068</b>		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
<b>12.</b> 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.					
<b>SIGNATURE:</b> <u>Ursula Andreu-Real</u> <b>09-20-04</b>   <b>954-9718316</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Date</span> <span>Daytime Phone #</span> </div>					

URSULA ANDREU-REAL  
PRESIDENT

Attachment  
66433943

**Paketdienst Corp**  
870 SW 49 Circle  
Margate, FL 33068  
Phone: (954) 971-8316

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September 16, 2004

Florida Department of State  
Division of Corporation  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Ref: Uniform Business Report  
Document # P03000117231  
EIN: 51-0486531

Dear Sir or Madam:

Per your instructions, we are returning the corrected report duly signed by an officer of Paketdienst Corp.

We apologize for any inconvenience that we may have caused you.

Your cooperation is highly appreciated.

Sincerely yours,

*Ursula Andreu-Real*  
Ursula Andreu-Real  
President

PHONE: 954-971-8316