

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 07, 2004 8:00 am
Secretary of State

04-29-2004 90352 027 ***150.00

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MOORE CR2E034 (11/03)

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| DOCUMENT # P03000118693 1. Entity Name ACT ONE INTERNATIONAL, INC. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Principal Place of Business 19361 SW 125TH AVE MIAMI FL 33177 | | | Mailing Address 19361 SW 125TH AVE MIAMI FL 33177 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Principal Place of Business SAME | | 3. Mailing Address SAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City & State | | City & State | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Zip | | Country | | Zip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Country | | Country | | 4. FEI Number 34-1993926 Applied For <input type="checkbox"/> Not Applicable | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Name and Address of Current Registered Agent ROSENTHAL, DAVID S 10761 SW 104 STREET MIAMI FL 33176 | | | 7. Name and Address of New Registered Agent Name ✓ CARL TAPP Street Address (P.O. Box Number is Not Acceptable) 19361 SW 125 AVE. MIAMI City FL Zip Code 33177 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 Carl Tapp DATE MAY 20, 2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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. <input type="checkbox"/> \$5.00 May Be Added to Fees | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> PS TAPP, CARL 19361 SW 125TH AVE MIAMI FL 33177 <input type="checkbox"/> Delete </td> </tr> <tr> <td> VPT TAPP, CARL 19361 SW 125TH AVE MIAMI FL 33177 <input type="checkbox"/> Delete </td> <td></td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table> | | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PS TAPP, CARL 19361 SW 125TH AVE MIAMI FL 33177 <input type="checkbox"/> Delete | VPT TAPP, CARL 19361 SW 125TH AVE MIAMI FL 33177 <input type="checkbox"/> Delete | | | | | | | | | | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> ✓ TAPP, CARL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 19361 SW 125 AVE, MIAMI FL 33177 </td> </tr> <tr> <td> ✓ VPS IACOB, MARIANA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 19361 SW 125 AV MIAMI, FL. 33177 </td> <td></td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table> | | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ✓ TAPP, CARL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 19361 SW 125 AVE, MIAMI FL 33177 | ✓ VPS IACOB, MARIANA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 19361 SW 125 AV MIAMI, FL. 33177 | | | | | | | | | | | |
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| 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: Carl Tapp 786 4-28-2004 251 8915 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |