## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000129986

Entity Name: STEROTYPES, INC

MIAMI, FL 33144

City-St-Zip:

FILED Oct 01, 2004 Secretary of State

Entity Nar	me: SIERO	TYPES, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
8211 SOU MIAMI, FL		TH TERRACE		
Current Mailing Address:			New Mailing Address:	
	ST HAMILTO OH 44074	N		
FEI Number:	: 52-2415277	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:	
1840 SW 2 4TH FLOC		<sup>2</sup> .A.		
	named entity e of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,
SIGNATUR				
		nic Signature of Registered Age		Date
		93(2)(b), F.S., the corporation did no ng Trust Fund Contribution (  ).	t receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WALKER, TO	VEST 12TH TERRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VAZQUEZ, JO	VEST 12TH TERRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	WALKER, BAI	VEST 12TH TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address:	DOWER, MOS	) Delete SES T VEST 12TH TERRACE	Title: Name: Address:	( ) Change ( ) Addition

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.

City-St-Zip:

SIGNATURE: TODD A. WALKER PD 10/01/2004