

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90033 012 ***150.00

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1. Entity Name
6881 NW 16TH TERRACE PROPERTIES, INC.



40004480



01172005 Chg-P CR2E034 (10/03)

4. FEI Number
27-0106265

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Principal Place of Business
**6881 NW 16TH TERRACE
FORT LAUDERDALE, FL 33309 US**

Mailing Address
**6881 NW 16TH TERRACE
FORT LAUDERDALE, FL 33309 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

**COHN, GARY
6881 NW 16TH TERRACE
FORT LAUDERDALE, FL 33309**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **COHN, GARY**
STREET ADDRESS **6881 NW 16TH TERRACE**
CITY-STATE-ZIP **FORT LAUDERDALE, FL 33309**

TITLE **VP** ☐ Delete
NAME **ROSENFELD, STEVEN**
STREET ADDRESS **6881 NW 16TH TERRACE**
CITY-STATE-ZIP **FORT LAUDERDALE, FL 33309**

TITLE **T.S.** ☐ Delete
NAME **ROSENFELD, NICOLE**
STREET ADDRESS **6881 NW 16TH TERRACE**
CITY-STATE-ZIP **FORT LAUDERDALE, FL 33309**

TITLE **D** ☐ Delete
NAME **COHN, GARY**
STREET ADDRESS **6881 NW 16TH TERRACE**
CITY-STATE-ZIP **FORT LAUDERDALE, FL 33309**

TITLE **D** ☐ Delete
NAME **ROSENFELD, STEVEN**
STREET ADDRESS **6881 NW 16TH TERRACE**
CITY-STATE-ZIP **FORT LAUDERDALE, FL 33309**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-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:

[Signature]

GARY COHN PRESIDENT

1/18/05

954 957 9755

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #