

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132166

FILED
Feb 09, 2005
Secretary of State

Entity Name: PRINCETON COMMERCIAL CENTRE, INC.

Current Principal Place of Business:

1239 NE 8TH STREET
HOMESTEAD, FL 33030

New Principal Place of Business:

1239 NE 8TH STREET
CAMPBELL PLAZA
HOMESTEAD, FL 33030

Current Mailing Address:

1239 NE 8TH STREET
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 61-1478467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, JOHN
1239 NE 8TH STREET
HOMESTEAD, FL 33030 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: D () Delete
Name: DIAZ, JOHN
Address: 1239 NE 8TH STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: DIAZ, JIMMY
Address: 1239 NE 8TH STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: D (X) Delete
Name: DIAZ, HENRY
Address: 1239 NE 8TH STREET
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIAZ, JOHN
Address: 1239 NE 8TH STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: VP (X) Change () Addition
Name: DIAZ, JIMMY
Address: 1239 NE 8TH STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN DIAZ

_____ Electronic Signature of Signing Officer or Director

P

02/09/2005

_____ Date