

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000034978

FILED  
Jan 03, 2004  
Secretary of State

Entity Name: JARTED FINANCIAL CORP.

## Current Principal Place of Business:

1035 NORTHEAST 125TH STREET  
STE. 320  
NORTH MIAMI, FL 33161

## New Principal Place of Business:

1035 NORTHEAST 125TH STREET  
STE. 320  
NORTH MIAMI, FL 331615841

## Current Mailing Address:

1035 NORTHEAST 125TH STREET  
STE. 320  
NORTH MIAMI, FL 33161

## New Mailing Address:

1035 NORTHEAST 125TH STREET  
STE. 320  
NORTH MIAMI, FL 331615841

FEI Number: 65-0419890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GALPERN, JOEL  
1035 NE 125TH ST STE 320  
NORTH MIAMI, FL 33161 US

## Name and Address of New Registered Agent:

GALPERN, JOEL  
1035 NE 125TH ST STE 320  
NORTH MIAMI, FL 331615841 US

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: JOEL G GALPERN

01/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GALPERN, JOEL  
Address: 1035 NORTHEAST 125TH STREET. STE. 320  
City-St-Zip: NORTH MIAMI, FL 33161

Title: V ( ) Delete  
Name: WAYNER, STEPHEN  
Address: 1035 NORTHEAST 125TH STREET. STE. 320  
City-St-Zip: NORTH MIAMI, FL 33161

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GALPERN, JOEL  
Address: 1035 NORTHEAST 125TH STREET. STE. 320  
City-St-Zip: NORTH MIAMI, FL 331615841

Title: V (X) Change ( ) Addition  
Name: WAYNER, STEPHEN  
Address: 1035 NORTHEAST 125TH STREET. STE. 320  
City-St-Zip: NORTH MIAMI, FL 331615841

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: JOEL G GALPERN

P

01/03/2004

Electronic Signature of Signing Officer or Director

Date