2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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LENT, MONIKA 3333 NE 34TH ST SUITE 404 FT LAUDERDALE FL 33308 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the obligations of registered agent, or both, in the State of Rordal, if am familiar with, and accept the registered agent, or both, in the State of Rordal, if am familiar with, and accept the Rordal agent, and in the State of Rordal, if am familiar with, and accept the Rordal agent, and in the Rordal agent accepts agent, or registered agent, or both, in the State of Rordal, if am familiar with, and accept the Rordal agent accepts agent, or registered agent, or both, in the State of Rordal, if am familiar with, and accept the Rordal agent accepts agent accept	Zιρ	Country	Zip C		Cour	ountry		Certificate of Status Desired			
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Signature 404 FT LAUDERDALE FL 33308 Chy FL Zo 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, hipself or prefer care of registered agent and file ill applicable. FILE NOWILI FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Psyable to Florida Department of State 10.		T 1105111/1				Name		. =		-	
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