

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000074612



1. Entity Name
BEZALEL EDITIONS LIMITED, INC.

Principal Place of Business
**C/O SUSAN GRUNDY
1858 RINGLING BLVD.
SARASOTA, FL 34236**

Mailing Address
**C/O SUSAN GRUNDY
1858 RINGLING BLVD.
SARASOTA, FL 34236**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

04222004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
65-0446268

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRUNDY, SUSAN
1858 RINGLING BLVD
SARASOTA, FL 34236**

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 of person or persons name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D LEVINSON, MEREDITH**
STREET ADDRESS **5724 HEATHER HOLLOW DRIVE**
CITY- ST- ZIP **DAYTON, OH 45415**

TITLE ☐ Delete
NAME **D GREENBERG, LAUREN B**
STREET ADDRESS **1511 ALLSTON WAY**
CITY- ST- ZIP **BERKELEY, CA 94703**

TITLE ☐ Delete
NAME **D GREENBERG, SETH M**
STREET ADDRESS **1511 ALLSTON WAY**
CITY- ST- ZIP **BERKELEY, CA 94703**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP
1001-001-0007 150.00

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

TITLE ☐ Change ☐ Addition
NAME
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CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- 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 another like empowered

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

May 26, 2004