

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000080292

Entity Name: CURVES N' WAVES, INC.

FILED  
Jun 30, 2004  
Secretary of State

**Current Principal Place of Business:**

275 MIRACLE MILE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

275 MIRACLE MILE  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-0456736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VITUCCI, JOSEPH  
275 MIRACLE MILE  
CORAL GABLES, FL 33134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: VITUCCI, JOSEPH  
Address: 1228 ANASTASIA AVE APT 4  
City-St-Zip: CORAL GABLES, FL 33134

Title: VD ( ) Delete  
Name: VITUCCI, NORMA  
Address: 210 174TH ST APT 1509  
City-St-Zip: MIAMI BEACH, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JOSEPH VITUCCI

PRES

06/30/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date