

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 APR 30 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000004297

1. Entity Name
COUSINS MICA INC.



Principal Place of Business
1785 NW 38TH AVE.
LAUDERHILL, FL 33311

Mailing Address
1785 NW 38TH AVE.
LAUDERHILL, FL 33311

DO NOT WRITE IN THIS SPACE



04142004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0463811

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FRANCO, BEKI
1785 NW 38TH AVE
LAUDERHILL, FL 33311

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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

200035793132
05/10/04--01018--003 **\$800.00

10. OFFICERS AND DIRECTORS

TITLE ~~DVP~~
NAME ~~MORDACHAI, HAIM~~
STREET ADDRESS ~~6567 RACQUET CLUB DR~~
CITY-ST-ZIP ~~LAUDERHILL, FL 33319~~

TITLE D
NAME MORDEHAY, ELI
STREET ADDRESS 3563 INVERRARY BLVD W
CITY-ST-ZIP LAUDERHILL, FL 33319

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 all other like empowered.

SIGNATURE: Eli Mordehay

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/24/04

954-485-6000

Daytime Phone #