

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000012084

1. Entity Name
THE ENMAR COMPANIES OF POMPANO, INC.



Principal Place of Business
**1507 S.E. 8TH AVE
DEERFIELD BEACH, FL 33441**

Mailing Address
**P.O. BOX 820
DEERFIELD BCH, FL 33443 US**

DO NOT WRITE IN THIS SPACE

% F 5 0 , , , , - . , 4 0 F &

01292004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0480170

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BOWEN, MARIAN
1507 S.E. 8TH AVE
DEERFIELD BEACH, FL 33441**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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**

**U00000137166
04/29/04-80028-020 158.75**

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD TAYLOR, ENOCH 1507 S.E. 8TH AVE DEERFIELD BEACH, FL 33441 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VSTD BOWEN, MARIAN 1507 S.E. 8TH AVE DEERFIELD BEACH, FL 33441 |
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**DO NOT WRITE
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:

Marian Bowen **MARIAN BOWEN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-21-04

Daytime Phone #

**954
428-9865**