

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 21, 2004 8:00 am**  
**Secretary of State**

05-21-2004 90001 030 \*\*\*150.00

**DOCUMENT # P94000021385**

1. Entity Name  
FDN PROPERTY MANAGEMENT, INC.



Principal Place of Business

6909 SW 18TH ST.  
#111  
BOCA RATON, FL 33433 US

Mailing Address

6909 SW 18TH ST.  
#111  
BOCA RATON, FL 33433 US

**54054971**



05062004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0476773</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

NAVILIO, FRANK  
~~6909 SW 18TH ST.~~ *110 SE 4th Ave, Ste 101*  
~~#111~~  
~~BOCA RATON, FL 33433~~ *Delray Bch, FL 33483*

**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 \$550.00**  
**Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	NAVILIO, DANIEL
STREET ADDRESS	<del>6909 SW 18TH ST.</del> <i>110 SE 4th Ave, Ste 101</i>
CITY - ST - ZIP	<del>BOCA RATON, FL</del> <i>Delray Bch, FL 33483</i>
TITLE	DV
NAME	NAVILIO, FRANK
STREET ADDRESS	<del>6909 SW 18TH ST.</del> <i>110 SE 4th Ave Ste 101</i>
CITY - ST - ZIP	<del>BOCA RATON, FL</del> <i>Delray Bch FL 33483</i>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

~~##~~ P94000021385

54054921

Please note, we  
have signed all  
reports.

Thank you for  
your patience.

L. J. M.  
Accountant

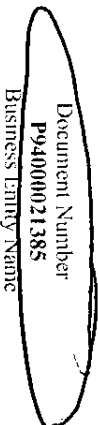
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Division of Corporations

Annual Report

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Document Number  
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Business Entity Name

FDN PROPERTY MANAGEMENT, INC.

FBI Number 650476773

FBI Number Status

☐ Applied For ☐ Not Applicable ☒ Current

Certificate of Status Desired ☐ Yes ☒ No

Principal Place of Business

Address 6909 SW 18TH ST.

Suite, Apt. #, etc. #111

City, State BOCA RATON FL

Zip Code & Country 33433 US

Mailing Address

Address 6909 SW 18TH ST.

Suite, Apt. #, etc. #111

City, State BOCA RATON FL

Zip Code & Country 33433 US

Name And Address of Registered Agent

Name (Last, First, Middle, Title) NAVILIO FRANK

-or- RA Business Name

Address 6909 SW 18 ST.

Suite, Apt. #, etc. #111

City, State BOCA RATON FL

Zip Code &amp; Country

33433

US

# P40000 21385

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature Frank Navilio

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126454921

*Attachments*



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Document Number  
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Business Entity Name

FBN PROPERTY MANAGEMENT, INC.

Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Officer/Director Name And Address

Title

P

Name (Last, First, Middle, Title) NAVILIO

DANIEL

-or- Entity Name

Street Address

6909 SW 18TH ST.

City, State

BOCA RATON

, FL

Zip Code & Country

Title

DV

Name (Last, First, Middle, Title) NAVILIO

FRANK

-or- Entity Name

Street Address

6909 SW 18TH ST.

City, State

BOCA RATON

, FL

Zip Code & Country

Title

Name (Last, First, Middle, Title),

-or- Entity Name

Street Address

12645045

Attachment

# P94000021385

City, State  
Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

☐ List more than six Officers/Directors ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

DV

*Attachment*

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Officer/Director Signature Frank Navilio

*# P94000021385*

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Division of Corporations

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Division of Corporations

Annual Report

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E-mail Address

Sunbiz E-file Account Payment

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