2004 FOR PROFIT CORPORATION

FILED May 03. 2004 08:00 AM

| ANNUAL REPORT | | | Secretary of State | | | |
|--|---|-----------------------|---------------------------------|-------------------------|--------------------|--------------------|
| DOCUMENT # P9500000594 1. Entity Name KAREN BERZOK, C.P.A., P.A. | 1 | | | | | oi State |
| 7667 W. SAMPLE RD., #304 CORAL SPRINGS, FL 33065 US | Mailing Address 7667 W. SAMPLE RD., #304 STE 405 CORAL SPRINGS, FL 33065 | US | | | | |
| DO NOT WRITE IN THIS SPA | | CE | 01292004 4. FEI Number 65-0563 | No Chg-P | CR2E034 (10 | |
| 6. Name and Address of Current Regi | stered Agent | · · | 5. Certificate o | of Status Desired | | equired |
| BERZOK, KAREN 7667 W. SAMPLE RD., #304 CORAL SPRINGS, FL 33065 | | | | NOT WI | | |
| 8. The above named entity submits this statement for the the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tits. | | ed office or register | <u> </u> | n, in the State of Flor | rida. I am familia | r with, and accept |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | Election Campaign Fina Trust Fund Contribution. | | .00 May Be led to Fees | | 154316 | • |
| 10. OFFICERS AND DIRE ITILE P NAME BERZOK, KAREN STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33065 ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | CTORS | | , | NOT W | RITE | 5 15U . 00 |
| CITY-ST-ZIP TITLE | _ ` | | | | | |

12. It 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.

NAME STREET ADDRESS CHTY ST-ZIP HILE narr STREET ADDRESS CITY-ST-DP

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