ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000054629

1. Entity Name PACHTER CORP.



Principal Place of Business

4811 BANYAN LANE TAMARAC, FL 33319 Mailing Address

4811 BANYAN LANE TAMARAC, FL 33319

Mar 15, 2004 08:00 AM Secretary of State



03122004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0644514 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOULIHAN, GERALD J ESQ. 2600 DOUGLAS ROAD SUITE 600 MIAML FL 33134 DO NOT WRITE
IN THIS SPACE

	33134				W. S. S. A. S.	
8. The above the obligat	named entity submits this statement for the plans of registered agent.	surpose of changing its regist	tered office or re	egistered agent, or bo	oth, in the State of Florida. I am fam	iliar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and little	if applicable. (NOTE: Regist	tered Agent signature	required when reinstelling)	DATE	
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Fir Trust Fund Contribution		\$5.00 May Be Added to Fees	U00000088033 93/15/94-80038-004	
10. OFFICERS AND DIRECTORS					- HOU DECIDE FROM TO THE SERVICE OF	154.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PACHTER, BERNARD 4811 BANYAN LANE TAMARAC, FL 33319					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· · · · · · · · · · · · · · · · · · ·	
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TITLE NAME STREET ADDRESS CRY-ST-ZIP				N.	THIS SPACE	and a state of the
TITLE NAME				,		

12. I hereby certify that the information supplied with this filing does not quality 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 eath; 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:

STREET AODRESS CITY-ST-ZIP

STREET ADDRESS CITY- ST- ZIP

3/12/04

954-485-3672