## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P95000083443

YALÉ FREEDLINE, C.P.A., P.A.



Feb 11, 2004 08:00 AM Secretary of State

Principal Place of Business

5313 LA GORCE DRIVE MIAMI BEACH, FL 33140 Mailing Address

5313 LA GORCE DRIVE MIAMI BEACH, FL 33140



**FILED** 

02062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0622881

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FREEDLINE, YALE

## DO NOT WRITE

5313 LA GORCE DRIVE MIAMI BEACH, FL 33140		IN THIS SPACE		
<ol> <li>The above named entity submits this statement for the pithe obligations of registered agent.</li> </ol>	urpose of changing its registered office o	r registered agent, or both	, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typod or printed name of registered agent and title 6	t applicable. (NOTE: Registered Agent signal	ure regulted 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		
10. OFFICERS AND DIRECT INTE  NAME FREEDLINE, YALE STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33140  IITLE PST NAME YALE FREEDLINE STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	TORS		U000000046151 02/11/04-80091-006 150.00 NOT WRITE	
TITLE NAME STREET ADDRESS CITY-SY-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	THIS SPACE	

12. I hereby certify that the information supplied with this filling 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 otherwise empowered.