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

## **DOCUMENT # P96000001645**

1. Entity Name

STE #1606

Principal Place of Business

POMPANO BEACH, FL 33062

TOGRAM ASSOCIATES, INC.



US

Mailing Address

1012 N OCEAN BLVD 1012 N OCEAN BLVD

DO NOT WRITE IN THIS SPACE

STE #1606

POMPANO BEACH, FL 33062

**FILED** 

Apr 29, 2004 08:00 AM Secretary of State

04182004

CR2E034 (10/03) No Chg-P

4. FEI Number 65-0649718

Applied For Not Applicat

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAITLAND, MARGOT 1012 N OCEAN BLVD STE #1606

## DO NOT WRITE IN THIS SPACE

POMPANO BEACH, FL 33062				IN THIS STACE		
	named entity submits this statement for the points of registered agent	purpose of changing its registered off	ice or re	egistered agent, or b	ooth, in the State of Florida. I am familiar with, and acce	
SIGNATURE_	Signature, typed or printed name of registered agent and title	f applicable (NOTE: Registered Agent	signature	required when reinstating)	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ny 1, 2004 Fee wili be \$550.00	Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MAITLAND, MARGOT 1012 N OCEAN BLVD #1606 POMPANO BEACH, FL 33062				U00000140431 04/29/04-80161-021 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					O STEWN STATES OF THE THE STATES OF	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DC	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			., .,			
TITLE NAME STREET ADDRESS CITY: ST-ZIP					• • •	

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 direction 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 changed, or on an attachment with an address, with all other like empowered.

4/76/04