


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P96000003820</b> 1. Entity Name <b>VENTURE REALTY, INC.</b>					
Principal Place of Business <b>3621 S FEDERAL HIGHWAY BOYNTON BEACH, FL 33435</b>			Mailing Address <b>3621 S FEDERAL HIGHWAY BOYNTON BEACH, FL 33435</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>65-0678271</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>MCCLEINTOCK, HARVEY 3621 S FEDERAL HIGHWAY BOYNTON BEACH, FL 33435</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>MCCLEINTOCK, HARVEY</b> <b>3621 S FEDERAL HIGHWAY</b> <b>BOYNTON BEACH, FL 33435</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: center;"> <b>400041667534</b>  <b>10/07/04--01025--009 **\$550.00</b> </div> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



09212004 Chg-P CR2E034 (10/03) *th*

**SIGNATURE:**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*10/4/04*