## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P96000025152**

1. Entity Name VIATICAL SERVICES, INC.



Principal Place of Business

2755 E. OAKLAND PARK BLVD.

SUITE 230

FORT LAUDERDALE, FL 33306

Mailing Address

2755 E. OAKLAND PARK BLVD.

SUITE 230

FORT LAUDERDALE, FL 33306





05-03-2004 91259 038 \*\*\*158.75



04272004

CR2E034 (10/03)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

MCNERNEY, MICHAEL J 200 E. LAS OLAS BLVD. SUITE 1800

10.

FORT LAUDERDALE, FL 33301

DO NOT WRITE IN THIS SPACE

	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, the obligations of registered agent.	i am familiar with, and accept
SI	GNATHE	

(NOTE: Registered Agent signature required when reinstating)

## 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

TITLE	P .
NAME	KHAN, AMEER
STREET ADDRESS	2755 E. OAKLAND PARK BLVD., SUITE 230
CITY-ST-2IP	FORT LAUDERDALE, FL 33306
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
BILE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
- HILE	
NAME	
STREET ADDRESS	
City-St-ZiP	
TITLE	_
NAME	·
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	S COA
CITY, CT. 7ID	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing doas to take 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 as a rate 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 because 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 a fine my ownered.

959 364-0509

Delamort

OLGA P. GROSSE, C.P.A., P.A.

6751 NW 34<sup>TH</sup> STREET MARGATE, FL 33063

TELEPHONE (954) 445-9996 FAX (954) 752-6870 opgcpa@bellsouth.net

April 28, 2004

Enclosed please find your 2004 For Profit Corporation Annual Report. This form is due on May 1, 2004. If you have filed this form between April 26, 2004 and April 27, 2004, then disregard this letter.

Please sign and date at the bottom of the form.

Mail the form in the enclosed envelope along with a check payable to Florida Department of State in the amount of \$150. Please put the name and FEI number in the memo section of the check.

Please feel free to call me if you have any questions.

Sincerely,

Olga P Grosse, CPA

\$ 158-75.6