FILED
Apr 29, 2004 8:00 am
Secretary of State
04-29-2004 90335 001 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000040694

1. Entity Name
SAL'S STEP BY STEP, INC.

Principal Place of Business
16190 64TH PLACE NORTH
LOXAHATCHEE, FL 33470

Mailing Address
16190 64TH PLACE NORTH
LOXAHATCHEE, FL 33470

04262004 Chg-P CR2E034 (10/03)

2. Principal Place of Business: SAlvAtorE TiRR SR / 5586 GAlambos St. / North Port Fl. / Zip 34286 / Country SARASotA

3. Mailing Address: 55 GAlambos St. / Suite, Apt. # etc. North Port / City & State Fl. / Zip 34286 / Country

4. FEI Number: 65-0668348 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
TIRRO, SALVATORE SR
16190 64TH PLACE NORTH
LOXAHATCHEE, FL 33470

7. Name and Address of New Registered Agent
Name: SAlvAtorE TiRRO SR.
Street Address (P.O. Box Number is Not Acceptable): 5586 GAlAmbos St.
North Port
City: Fl. 34286 FL Zip Code

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 [signature] President 4-26-04
Signature, typed or printed name of registered agent and title if applicable 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 DIRECTORS		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST TIRRO, LEEANNE 16190 64TH PLACE NORTH LOXAHATCHEE, FL 33470	☐ Delete	ST. LEEANNE M. TIRRO 5586 GAlAmbos St. North Port Fl. 34286	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TIRRO, SALVATORE SR 16190 64TH PLACE NORTH LOXAHATCHEE, FL 33470	☐ Delete	P TIRRO, SAlvAtorE TiRRO SR. 5586 GAlAmbos St. North Port Fl 34286	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V TIRRO, SALVATORE J JR 16190 64TH PLACE NORTH LOXAHATCHEE, FL 33470	☐ Delete	V TIRRO SAlvator J. JR 4512 ARDAlE St. SARASotA Fl. 34232	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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 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 [signature] SAlvAtorE TIRRO 4-26-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #