2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000046420

1. Entity Name

WHITNEY SALES & SERVICE, INC.



FILED
Mar 24, 2004 08:00 AM Secretary of State

Principal Place of Business

7921 SW 131 AVE MIAMI, FL 33183 Mailing Address

7921 SW 131 AVE MIAMI, FL 33183



DO NOT WRITE IN THIS SPACE

03222004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0669211

Applied For Not Applicable

5. Certificate of Status Desired

Y

\$8.75 Additional Fee Required

Name and Address of Current Registered Agent

HTNEY, LISA

WHITNEY, LISA 7921 SW 131 AVE MIAMI, FL 33183

DO NOT WRITE IN THIS SPACE

www.ivii, i C	35165			IN -	THIS SPACE
8. The above the obligati	named entity submits this statement for the plons of registered agent.	ourpose of changing its register	ed office or re	egistered agent, or bo	oth, In the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	d applicable. (NOTE Régistere	d Agent signature	(gribsisher กย์ทั้ง belluper	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		\$5.00 May Be Added to Fees	03/24/04-80019-013 158.75
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADORESS CHY-ST-ZP	D WHITNEY, ALAN 7921 SW 131 AVE MIAMI, FL 33183		-		
NAME STREET ADDRESS CITY-ST-ZIP	D WHITNEY, LISA 7921 SW 131 AVE MIAMI, FL 33183			 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ACORESS CITY-ST-ZP					
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 director					

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:

AND TYPED ON PRINTED NIGHE OF SIGNING OFFICER ON DIRECTO

3/15/0

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