

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000052395 1. Entity Name PRINE SCIENTIFIC, INC.	
--	---

Principal Place of Business 2517 NW 21ST STREET FT LAUDERDALE, FL 33305 US	Mailing Address 2517 NE 21ST STREET FT LAUDERDALE, FL 33305 US
--	--

DO NOT WRITE IN THIS SPACE

% F 5 2 , , , , 1 . / 5 1 F &

04142004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0675685	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRINE, CLAUDIA M
2517 NE 21 ST
FT LAUDERDALE, FL 33305

**DO NOT WRITE
IN THIS SPACE**

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 _____

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	U000000116486 04/16/04-80066-016 150.00
---	--	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS PRINE, CLAUDIA 2517 NE 21ST STREET FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOV PRINE, KEVIN YORK 2517 NE 21ST STREET FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:  **Claudia Prine - President** **4/15/04 (954) 566-8108**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #