2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 19, 2004 08:00 AM Secretary of State DOCUMENT # P96000061095 1. Entity Name FRITZ EQUITIES, INC. Principal Place of Business Mailing Address 26100 SW 112 AVE 26100 SW 112 AVE HOMESTEAD FL 33032 US HOMESTEAD FL 33032 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 65-0683977 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CROWN, HOWARD L Street Address (P.O. Box Number is Not Acceptable) C/O GRANT, FRIDKIN, & PEARSON P.A. 5551 RIDGEWOOD DR SUITE 501 NAPLES FL 34108 City 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, typed or printed name of registered agent and title & applicable (NOTE Registered Agen) signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete ☐ Change Addition TITLE TITLE FRITZ, JOYCE NAME NAME U000000056535 STREET ADDRESS STREET ADDRESS 26100 SW 112 AVE 02/19/04-80023-021 150.00 CITY -ST-ZIP HOMESTEAD FL 33032 CITY - ST - ZIP ☐ Change ☐ Delete TITLE Addition FRITZ, JOHN CALVIN NAME NAME STREET ADDRESS 26100 SW 112 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP HOMESTEAD FL 33032 ☐ Delete Change ☐ Addition TITLE TITLE MAME NAME FRITZ, JAMES LOUIS STREET ADDRESS STREET ADDRESS 26100 SW 112 AVE CITY - ST - ZIP CITY-ST-ZIP HOMESTEAD FL 33032 ☐ Change TITLE ☐ Delete TITLE ■ Addition FLOYD, JENNIFER FRITZ NAME NAME 26100 SW 112 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOMESTEAD FL 33032 CITY-ST-7/P Addition TITLE ☐ Delete TITLE Change FRITZ, JEFFREY ERROL NAME NAME 26100 SW 112 AVE STREET ADDRESS STREET ADDRESS HOMESTEAD FL 33032 CITY - ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE Delete FRITZ, JACK STEPHEN NAME MAME 26100 SW 112 AVWE STREET ADDRESS STREET ADDRESS HOMESTEAD FL 33032 CITY-ST-ZIP 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 of the corporation or the receiver of 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 given like empowered.

SIGNATURE:

SNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/04 305-258-341

**FILED**