

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000063032	
1. Entity Name PHILAR & CO. INC.	

Principal Place of Business 1131 SCARLET OAK STREET HOLLYWOOD FL 33019	Mailing Address 1131 SCARLET OAK STREET HOLLYWOOD FL 33019
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

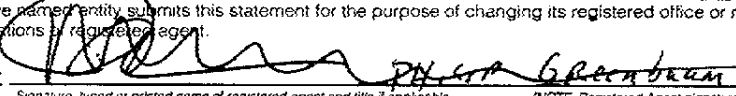
4. FEI Number 65-0684854	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required



MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent GREENBAUM, PHILIP 1131 SCARLET OAK STREET HOLLYWOOD FL 33019
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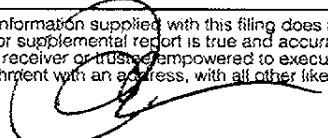
7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP GREENBAUM, PHILIP 1131 SCARLET OAK STREET HOLLYWOOD FL 33019 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SILBERSTEIN, LARRY 7221 S DEVON DRIVE TAMARAC FL 33321 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PEREL, NEIL 2415 N.W. 53RD STREET BOCA RATON FL 33496 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCHWARTZ, HOWARD 2425 N.W. 53RD STREET BOCA RATON FL 33496 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	000000034704 ☐ Change ☐ Addition 02/05/04-80094-005 150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ 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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Ph. Greenbaum 2/1/04 305 392 4026