

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2004 8:00 am
Secretary of State

04-08-2004 90045 049 ***150.00

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1. Entity Name

CAMELOT BROKERAGE AND MANAGEMENT CONSULTANT, INC.



Principal Place of Business

2550 N.E. 51ST STREET
SUITE 302
FT. LAUDERDALE FL 33308

Mailing Address

2550 N.E. 51ST STREET
SUITE 302
FT. LAUDERDALE FL 33308

04060106



MOORE CR2E034 (11/03)

2. Principal Place of Business

101 E. McNAB ROAD

3. Mailing Address

101 E. McNAB ROAD

Suite, Apt. #, etc.

303

Suite, Apt. #, etc.

303

City & State

POMPANO BEACH

City & State

POMPANO BEACH

4. FEI Number

65-0697835

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANNUNZIATA, JOSEPH M
2550 N.E. 51ST STREET
SUITE 302
FT. LAUDERDALE FL 33308

address change

7. Name and Address of New Registered Agent

Name ANNUNZIATA, JOSEPH - M

Street Address (P.O. Box Number is Not Acceptable)
101 E. McNAB ROAD

City POMPANO BEACH

FL

Zip Code
33060

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 *Joseph M. Annunziata* JOSEPH M. ANNUNZIATA PRESIDENT

2/24/04

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

10. OFFICERS AND DIRECTORS

TITLE
NAME ANNUNZIATA, JOSEPH M ☐ Delete
STREET ADDRESS 2550 N.E. 51ST STREET #302
CITY-ST-ZIP FT. LAUDERDALE FL 33308

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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 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: *Joseph M. Annunziata* JOSEPH M. ANNUNZIATA

2/24/04 9/4 771-9310

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #