## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000083839

Entity Name: CENTREFUND ACQUISITION CORP.

FILED Mar 17, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1696 NE MIAMI GARDENS DRIVE SUITE 200

NORTH MIAMI BEACH, FL 33179

**New Mailing Address: Current Mailing Address:** 

1696 NE MIAMI GARDENS DRIVE 1696 NE MIAMI GARDENS DRIVE SUITE 200 NORTH MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 33179

FEI Number: 65-0836659 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARCUS, ALAN J 20803 BISCAYNE BLVD **SUITE #301** MIAMI, FL 33180 US

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

1696 NE MIAMI GARDENS DRIVE

NORTH MIAMI BEACH, FL 33179

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.

SIGNATURE: CARINA DUNLAP 03/17/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPAS ( ) Delete Title: (X) Change ( ) Addition

Name: KATZMAN, CHAIM Name: KATZMAN, CHAIM 1696 NE MIAMI GARDENS DRIVE STE 200 1696 NE MIAMI GARDENS DRIVE Address: Address:

City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: NORTH MIAMI BEACH, FL 33179

DVS Title: VPD (X) Change ( ) Addition Title: () Delete Name: VALERO, DORON Name: VALERO, DORON

1696 NE MIAMI GARDENS DRIVE STE 200 1696 NE MIAMI GARDENS DRIVE Address: Address: NORTH MIAMI BEACH, FL 33179 NORTH MIAMI GARDENS, FL 33179 City-St-Zip: City-St-Zip:

Title: Title: () Delete **FVP** ( ) Change (X) Addition

SIPZNER, HOWARD M Name: Name:

1696 NE MIAMI GARDENS DRIVE Address Address: City-St-Zip: City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: DORON VALERO 03/17/2004