2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000087004

1. Entity Name LAKE WORTH PROPERTIES, INC.



FILED Jan 23, 2004 08:00 AM Secretary of State

Principal Place of Business 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL Mailing Address

8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL

01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 65-0731606 Not Applicable

6. Name and Address of Current Registered Agent

KOVALSKY, LISA ESQ. 12255 SW 114TH TERRACE MIAMI, FL 33186

DO NOT WRITE IN THIS SPACE

ше опяданоть от гедізлегей аделя.					
SIGNATURE Signature, hypod or printed name of registered agent and tale if applicable. (NOTE, Registered Agent signature required when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ny 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		\$5.00 May Be Added to Fees	000000011440 01/23/04-80037-019 158.75
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EISENBERG, ROBERT 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EISENBERG, ELAINE 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL			1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EISENBERG, CARA 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL			DO	NOT WRITE
TITLE HAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE
TITLE HAME STREET ADDRESS CITY - ST - ZIP				<u>ر پی ۱۳۰۳ می میکونی بدر دی محوید که سخت</u>	
TITLE RAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby 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					

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

12. I neeby 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 anachment with an address, with all other like empowered.

SIGNATURE:

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1/19/04 561-731-002

Daytime Phone i