## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P96000096682

Entity Name

SOUTHSIDE WAREHOUSE, INC.

Principal Place of Business

JACKSONVILLE, FL 32216

6950 PHILLIPS HWY

STE 15

6950 PHILLIPS HWY

Mailing Address

STE 15

DO NOT WRITE IN THIS SPACE

JACKSONVILLE, FL 32216

**FILED** 

Mar 12, 2004 08:00 AM Secretary of State

01052004

Jr. President 3/10/04 (904)

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3414124

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

MORALES, RICARDO JR 6950 PHILLIPS HWY STE 15 JACKSONVILLE, FL 32216

SIGNATURE: 4

## DO NOT WRITE IN THIS SPACE

SIGNATI IRF	tions of registered agent.						
	Signature, typed or printed name of registered agent and life t	f applicable (NOTE Registered A	ent signatur	e regulred when reinstating)	·	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financia Trust Fund Contribution.	»; □	\$5.00 May 8e Added to Fees			
10.	OFFICERS AND DIREC	TORS					
FITLE NAME STREET ADORESS CITY - ST - ZIP	SD GARTNER, W.A. 1660 PRUDENTIAL DRIVE, STE 230 JACKSONVILLE, FL 32207				นดถอดอ	10C101	
RIILE Name Street Address City-St-21P	PD MORALES, RICARDO JR 6950 PHILLIPS HWY STE 15 JACKSONVILLE, FL 32216	-			U000000 03/12/04-8	150-164 10025-009 150.	00 .
title Name Street address City-St-Zip				DO	NOT WF	RITE	
RTLE NAME SIREET ADDRESS CXTY - SI - ZIP				IN	THIS SPA	ACE	
title Name Street address City St-Zip							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated of the corchanged,	certify that the information supplied with this it on this report or supplemental report is true a portation or the receiver of trustage empowered , or on an attachment with an address, with all	ling does not qualify for the exemp and accurate and that my signatured to execute this report as required other like empowered.	tion state e shall ha I by Char	ed in Section 119.07(3 we the same legal effecter 607, Florida Status	(i), Florida Statutes, I fur ect as if made under oati tes; and that my name a	rther certify that the inform n; that I am an officer or d ppears in Block 10 or Blo	nation irector ck 11 if