

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90011 030 ***150.00


DOCUMENT # P97000012877

1. Entity Name
 JIM & PETER, INC.



| | |
|--|--|
| Principal Place of Business 4320 N.W. 167TH STREET MIAMI, FL 33054 | Mailing Address 4320 N.W. 167TH STREET MIAMI, FL 33054 |
|--|--|

DO NOT WRITE IN THIS SPACE



01062004 No Chg-P CR2E034 (10/03)

| | |
|---|---------------------------------------|
| 4. FEI Number 65-0726408 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

GEORGANAS, DEMETRIOS
 4320 N.W. 167TH STREET
 MIAMI, FL 33054

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PST GEORGANAS, DEMETRIOS 1253 RODMAN STR HOLLYWOOD, FL 33019 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VTD ALEXOPOULOS, PETER 1537 HOLLYWOOD BLVD HOLLYWOOD, FL 33020 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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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: *D. George* 1/7/04 (305) ~~430-8080~~ 430-8080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #