

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000021189

Entity Name: PETERSEN FLORIDA ENTERPRISES, INC.

FILED  
Jan 11, 2005  
Secretary of State

**Current Principal Place of Business:**

297 NW 90 AVE  
POMPANO BEACH, FL 33071

**New Principal Place of Business:**

297 NW 90 AVE  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

297 NW 90 AVE  
POMPANO BEACH, FL 33071

**New Mailing Address:**

297 NW 90 AVE  
CORAL SPRINGS, FL 33071

FEI Number: 59-3431824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMAS, BAUR  
100 N BISCAYNE BLVD  
MIAMI, FL 33132 US

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

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PETERSEN, GABRIELE  
Address: 2132 N.E. 61 CT.  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete  
Name: PETERSEN, HANS JOACHIM  
Address: 2132 N.E. 61 CT.  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: PETERSEN, GABRIELE  
Address: 297 NW 90TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D (X) Change ( ) Addition  
Name: PETERSEN, HANS JOACHIM  
Address: 297 NW 90TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33071

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 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.

SIGNATURE: GABRIELE PETERSEN

Electronic Signature of Signing Officer or Director

MRS

01/11/2005

Date