


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90046 005 ***150.00

DOCUMENT # P97000021990	
1. Entity Name 1410 OCEAN DRIVE, INC.	

Principal Place of Business 1238 COLLINS AVE MIAMI BEACH, FL 33139	Mailing Address 1238 COLLINS AVE MIAMI BEACH, FL 33139
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2. Principal Place of Business	3. Mailing Address 1111 Lincoln Rd Suite 400
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State Miami Beach, FL
Zip	Country 33139 USA

02122004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent WEINBERG, JAY 1238 COLLINS AVE MIAMI BEACH, FL 33139	
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7. Name and Address of New Registered Agent	
Name Weinberg, Jay	
Street Address (P.O. Box Number is Not Acceptable) 1111 Lincoln Rd #400	
City Miami Beach	FL Zip Code 33139

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P WEINBERG, JAY 1238 COLLINS AVE MIAMI BEACH, FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
VP WEINBERG, SCOTT 1238 COLLINS AVE MIAMI BEACH, FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1111 Lincoln Rd #400 Miami Beach, FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1111 Lincoln Rd #400 Miami Beach, FL 33139	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 or without other like empowered.

SIGNATURE: SCOTT WEINBERG 2/12/04 5386361
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #