## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000047746

FILED Feb 10, 2004 Secretary of State

Entity Nan	ne: GULFSTREAM F	PUMP & EQUIPMENT,INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	FIRST AVE RDALE, FL 33315	US				
Current Mailing Address:			New Maili	New Mailing Address:		
P O BOX 1 FT LAUDE	4543 RDALE, FL 33302	US				
FEI Number:	65-0805314 FEI Nu	umber Applied For()  FEI Nu	umber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
DORINI, AL 1720 S.E. 9 FORT LAU		6 US				
The above in the State	named entity submits of Florida.	this statement for the purpose	of changing i	ts registered of	fice or registered agent, or both,	
SIGNATUR	RE:					
	Electronic Signa	ature of Registered Agent		Date		
Election Cam	npaign Financing Trust F	und Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) Delete DORINI, ALAN A 1720 SE NINTH STREET FT LAUDERDALE, FL 3		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DVST ( ) Delete DORINI, DONALD K ONE HENDRICKS ISLE FT LAUDERDALE, FL 3	3301	Title: Name: Address: City-St-Zip:	VP (X) DORINI, ALAN A 1720 SE NINTH FT LAUDERDAL	STREET	
Title: Name: Address: City-St-Zin:	V () Delete DORINI, CLAIRE L 1720 SE NINTH STREET		Title: Name: Address: City-St-Zip:	VP (X) DORINI, CLAIRE 1720 SE NINTH	STREET	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ALAN A. DORINI P 02/10/2004

() Delete

FORT LAUDERDALE, FL 33301

DORINI, DARLA J

ONE HENDRICKS ISLE

Name:

Address:

City-St-Zip:

(X) Change ( ) Addition

DORINI, DARLÁ J

ONE HENDRICKS ISLE

FORT LAUDERDALE, FL 33301