,2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: ∠

SIGNATUR

Jan 26, 2004 8:00 am **Secretary of State DOCUMENT # P97000057580** 01-26-2004 90005 034 ***150.00 FINDEISS ENTERPRISES, INC. Principal Place of Business Mailing Address 500 W CYPRESS CR ROAD 500 W CYPRESS CR ROAD 54000567 FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 Principal Place of Business 100 NOCEAN BLUD 100 N OCEAN Suite, Apt. #, etc. 3/0/ Suite, Apt. #, etc. 01132004 CR2E034 (10/03) Chg-P 310 City_& State 4. FEI Number Applied For F-L 440ELDACE AUDELD ALE 65-0778505 Not Applicable \$8.75 Additional 5. Certificate of Status Desired IN OWARD Fee Required - 6.-Name and Address of Current Registered Agent-7. Name and Address of New Registered Agent FINDEISS, J. CLIFFORD Street Address (P.O. Box Number is Not Acceptable) **8220 STATE ROAD 84** SUITE 200 FORT LAUDERDALE, FL 33324 BOCADALE 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** \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PCEO TITLE ☐ Addition TITLE ☐ Delete Change FINDEISS, J C NAME NAME # 310c 3120 NE 46TH ST STREET ADDRESS STREET ADDRESS 33305 CITY-ST-ZIP FT LAUDERDALE, FL 33330 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IF ☐ Delete TITLE ☐ Addition TITLE `□ 'Change NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

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