2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

1. Entity Nam	# P9700006 NEN OF FLOR					08:00 of Sta					
Principal Place of Business 7920 NW 76TH AVE MIAMI FL 33166 US			7920	Mailing Address 7920 NW 76TH AVE MIAMI FL 33166 US							
Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			MOORE CR2E034 (11/03)				
City & State			City	City & State			4. FE	Number 65-07684		Ā	pplied For
Zip	Country		Zip	Zip Coun		try	5. Ce	ertificate of Status Desire		\$8.75 Ad	
6. Name and Address of Current Registered Agen							7. Na	me and Address of Nev	v Registere	d Agent	
		Name									
DANNER, SIEGRIED 7920 NW 76TH AVE MEDLEY FL 33166						Street Address (P.O. Box Number is Not Acceptable)					
William 12 00 100						City	FL Zip Code				
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											
Signature typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaign Trust Fund Contrib	-		00 May Be ed to Fees
10.		OFFICERS	AND DIRECTO	RS	11.		ADD	ITIONS/CHANGES TO (FFICERS A	ND DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MAGIDOW 7920 NW T MEDLEY F			☐ Delete	1	ŀ		U00000 02/16/04-	1052784 180107-1	□ Change 005 150.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NILES, JAI 7920 NW 7 MIEDLEY I	6TH AVE		Delete		ł			·	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	i	SIEGFRIED 76TH PLACE 7L 33166	voge .	☐ Delete		}			•	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	- 1					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		i				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete						Change	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 attachnient with an address, with all other like empowered.											

SIGNATURE SHOWLD DOWN (SIEGFEIED DANNER) (305)887-6799

FILED