

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90012 019 ***150.00

DOCUMENT # P97000069775

1. Entity Name

ECHO REPORTING SERVICE, INC.



Principal Place of Business

515 N FLAGLER DR
P200
WEST PALM BEACH FL 33401
US

Mailing Address

4364 BUTTERNUT ST
PALM BEACH GARDENS FL 33410
US

2. Principal Place of Business

515 N. FLAGLER DR

Suite, Apt. #, etc.

200

City & State

WEST PALM BEACH

Zip

33401

Country

USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Country

Country



MOORE

CR2E034 (11/03)

4. FEI Number

65-0776346

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PETERSEN, JANE
4364 BUTTERNUT ST
PALM BEACH GARDENS FL 33410

Name

Street Address (P.O. Box Number is Not Acceptable)

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 Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME PETERSEN, JANE P
STREET ADDRESS 4364 BUTTERNUT ST
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

☐ Delete

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NAME
STREET ADDRESS
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☐ 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 attachment with an address, with all other like empowered.

SIGNATURE:

Jane Peterson JANE P. PETERSEN

2/24/04 561 627 3427

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #