## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000076548

Entity Name: CUSTOM ENTERTAINMENT DESIGNERS, INC.

FILED Sep 23, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1073 SW GENERAL PATTON TERR
PORT ST LUCIE, FL 34953
10940 SW FALL CREEK DRIVE
PORT ST LUCIE, FL 34987

Current Mailing Address: New Mailing Address:

1073 SW GENERAL PATTON TERR
PORT ST LUCIE, FL 34953
10940 SW FALL CREEK DRIVE
PORT ST LUCIE, FL 34987

FEI Number: 65-0778946 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ERIC, JOEL

1073 SW GENERAL PATTON TERR

PORT ST LUCIE, FL 34953

ERIC, JOEL

10940 SW FALL CREEK DRIVE

PORT ST LUCIE, FL 34987

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.

SIGNATURE: 09/23/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition PASSARETTI, JOHN PASSARETTI, JOHN Name: Name: 1074 SE SPINNAKER AVE 1526 MINORCA AVENUE Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34983 City-St-Zip: PORT ST. LUCIE, FL 34952

Title: PS () Delete Title: PS (X) Change () Addition

Name: ERIC, JOEL Name: ERIC, JOEL

Address: 1073 SW GENERAL PATTON TERRACE Address: 10940 SW FALL CREEK DRIVE City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: PORT ST. LUCIE, FL 34987

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.

SIGNATURE: JOEL ERIC PS 09/23/2004