2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000097660

1. Entity Name

SYLVIE BROWN & ASSOCIATES, INC.



FILED Jan 15, 2004 08:00 AM Secretary of State

Principal Place of Business

1385 CEPHEUS COURT MERRITT ISLAND, FL 32953 Mailing Address

1385 CEPHEUS COURT MERRITT ISLAND, FL 32953



01132004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3482273 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

BROWN, SYLVIE 1385 CEPHEUS COURT MERRITT ISLAND, FL 32953

SIGNATURE:

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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 NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	F	_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, SYLVIE 1385 CEPHEUS COURT MERRITT ISLAND, FL 32953				000000005338 01/16/04-80013-017 150.00
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TITLE NAME STREET ADDRESS GITY-ST-ZIP				· · -	
TETLE NAME STREET ADDRESS CATY-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.					