2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

changed, or on an attachment with

SIGNATURE:

address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 10, 2004 8:00 am Secretary of State DOGUMENT # P97000103988 1. Entity Name 02-10-2004 90025 017 ***150.00 SHERIDAN LAW ASSOCIATES, INC. Mailing Address Principal Place of Business 3864 SHERIDAN STREET 3864 SHERIDAN STREET としいしひりとみ HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) 4. FEI Number Applied For City & State City & State 65-0800814 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DOLCHIN STRIÀR, MICHÁEL P Street Address (P.O. Box Number is Not Acceptable) 3864 SHERIDAN STREET SHEDZIDAN HOLLYWOQD FL 33021 Zip Code 3302 10000 p 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. SIGNATURÉ DATE ed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. VTD ☐ Change ☐ Addition nne ☐ Delete TITLE STRIAR, MICHAEL P NAME NAME 3864 SHERIDAN STREET STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition SD ☐ Delete TITLE TITLE SIMONS, JEROME A NAME MAME 3864 SHERIDAN STREET STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition PD TITLE NAME PLATT#MARSHALL-D~ ~ NAME STREET ADDRESS STREET ADDRESS 3864 SHERIDAN STREET CITY-ST-ZIP CITY-ST-7IP HOLLYWOOD FL 33021 ☐ Addition TITLE D۷ ☐ Delete TITLE ☐ Change ORENSTEIN, MICHAEL D NAME STREET ADDRESS 3864 SHERIDAN STREET STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP CITY-ST-ZIP DTV ☐ Change [7] Addition ☐ Defete TITLE SOLOMON, JEFFREY NAME NAME 3864 SHERIDAN STREET STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Change Addition TITLE TITLE DOLCHIN, STEPHEN NAME 3864 SHÈRIDAN STREET STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 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 of pustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED