## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Secretary of State DOCUMENT # P98000003302 05-04-2004 90171 039 \*\*\*150 00 1. Entity Name BERSA-CHEM, INC. Principal Place of Business Mailing Address 14020408 100 NORTH BISCAYNE BOULEVARD 100 NORTH BISCAYNE BOULEVARD 21ST FLOOR - NEW WORLD TOWER 21ST FLOOR - NEW WORLD TOWER MIAMI, FL 33132 MIAMI, FL 33132 2. Principal Place of Business 1130 E. HALLANDALE 1130 E. HALLANDALE 04262004 BEACH BLVD. CR2E034 (10/03) Cha-P BEACH BLVD. City & State HALLANDALE BEACH, FL 4. FEI Number Applied For HALLANDALE BEACH, FL 65-0808316 Not Applicable \$8.75 Additional Country USA 33009 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LESLIE ALAN ROZENCWALG, ESQ BAUR, THOMAS 100 NORTH BISCAYNE BOULEVARD Street Address (P.O. Box Number is Not Acceptable) O - CARR 21ST FLOOR - NEW WORLD TOWER MIAMI, FL 33132 W. HALLANDALE BEACH BLUD. HALLANDALE BEACH d office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above nar entity submits this nent for the purpose of changing its registe the obligation 42614 Lestre Alan Rozencuaia, tsa gnature, typed or printed name of registered agent a (NOTE: I gistered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11, PSD TITLE ☐ Delete TITLE BIRNBAUM BERNARDO NAME NAME 1130 E. Hallandale Beach Blid. 100 NORTH BISCAYNE BLVD. 21ST FLOOR STREET ADDRESS STREET ADDRESS Hallandale Beach, Fc 33009 CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP TITLE v Addition ☐ Delete nne NAME BIRNBAUM, VIVIAN NAME 1130 E. Hallandale Beach Blud. STREET ADDRESS 100 N. BICAYNE BLVD., 21ST FLOOR STREET ADDRESS Hallandale Beach 12 33009 CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP TITLE Delete ☐ Addition ПΠЕ ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP mre Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TTLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this fill does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if her like empowered. indicated on this report or supplements eport is true a of the corporation or the receive changed, or on an attachment v with an Bernardo Birnbaum, Pres. 4/26/04 SIGNATURE: Daytime Phone #

FILED May 04, 2004 8:00 am