2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPES ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 08, 2004 08:00 AM Secretary of State

	ANNUAL N	EFURI		-	Secre	tary of	State
	MENT # P9800003762	23			20010	July 3	
1. Entity Nan INNS OF	COURT I, INC.						
ļ		<u></u>	1.15		-		-
		failing Address					
7990 RED R MIAMI, FL 3		7990 RED ROAD Wiami, FL 33143					
		,		C THE RECEDE LEGS	E (MINE (MIII MM))) NAME (MINE	33 - Elius I III3 40 - Elius - Eli	引展 55紫褐雀 5555紫雀F 55 5紫鶯b
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				01062004	No Chg-P	CR2E034 (10/03)
	O NOT WRITE I	N THIS SPA	CE	4. FEI Numbe			Applied For
				65-083			Not Apolicable
				5. Certificate	of Status Desired		75 Additional Required
	6. Name and Address of Current Regis	stered Agent		<u> </u>			· noquirou
MAWAG	ENTS INC				10T 11	i Ameli S seller Ameri	
M & W AGENTS, INC. 2101 CORPORATE BLVD SUITE 216 BOCA RATON, FL 33431			DO NOT WRITE IN THIS SPACE				
R The shows	named entity submits this statement for the	numnes of changing its register	ed office or register	red scent or bot	to in the State of Ele	vida Lamfamil	including and accord
the obtiga	tions of registered agent.	parpose of ortologing to logister	od omos or rogicio	ted agont, or bot	on more exacts on the	Secondary of Control (Control)	in with and pocopi
SIGNATURE.		. <u> </u>	<u> </u>		- <u>- 157</u>	<u>-</u> ,	
	Signsture, typed or printed name of registered agent and title	if applicable. (NOTE, Registera	d Agent signature required	d when reinstating)	<u> </u>	DATE	
	E NOW!!! FEE IS \$150.00	9, Election Campaign Finar		.00 May Be			
After M	ay 1, 2004 Fee will be \$550.00	Trust Fund Contribution,	☐ Add	ed to Fees	U88881 - 04 200 204 -)106593 	ነግ የምን ለጠነ
10.	OFFICERS AND DIRE	CTORS			- 017 007 3 1	OUDER OR	.c 100,00
TITLE NAME	D RUSSO, ELIZABETH						
STREET ADDRESS	7990 RED ROAD						
City-St-ZIP	MIAMI, FL 33143		1				
TITLE NAME	D RUSSO, DON A						
STREET ADDRESS	7990 RED ROAD						
City-ST-ZIP	MIAMI, FL 33143		1.			**	
TITLE NAME							
STREET ADDRESS			l	200	NOT W	DITE	
CITY-ST-ZIP		· - 42:7:7:		טט	NOT W	HIIE	
TITLE	-		1	IN T	THIS SF	PACE	
NAME STREET ADDRESS							
CRTY - ST - ZIP							
TRILE			1		_		
NAME DESCRIPTIONS			l				
STREET ADDRESS CITY-ST-ZIP							
TITLE			1				
NAME			1				
STREET ADDRESS CITY-ST-ZIP			l				
	cartifu that the information expelled with this	Since rises not exertify for the aver	motion stated in Co	otion 119 07/9)/	i) Florida Ctatutas	forther and it	at the intermeter
indicated	certify that the information supplied with this is on this report or supplemental report is true portation or the receiver or trustife empowers, or on an attachment with an address, with a	and accurate and that my signa d to executarble anore as recom-	ture shall have the	same legal effec Florida Statuto	t as if made under one and that my name	oath; that I am at	n officer or director
changed	, or on an attachment with an address, with a	I other like supowered.	- (. , which crowler	् भारतस्य सम्बद्धाः । । भूगास्या	- - ~hhanes «1010	~~ 10 01 0100 1111