2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000049735

1. Entity Name

3449 JOHNSON STREET, INC.



FILED Apr 05, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

3449 JOHNSON STREET HOLLYWOOD, FL 33021 3449 JOHNSON STREET HOLLYWOOD, FL 33021



03262004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0841360 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

UECKER, JEFFREY CRAIG 3449 JOHNSON STREET HOLLYWOOD, FL 33021

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8. The above the obligat	named entity submits this statement for the pulions of registered agent.	rpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_					
	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registored	Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECT	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D UECKER, RICHARD KEITH 151 CALLE LARGO HOLLYWOOD, FL 33021				U00000103835 04/05/04-80073-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VECKER, RICHARD H 3449 JOHNSON ST HOLLYWOOD, FL 33021				0.11.00.10.1.000.10.000.100.100
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HALLIAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard H. YUZKER

4/2/04

(954) 964-4113