## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P98000053553**

1. Entity Name

PROSPERITY POINTE SERVICES, INC.



FILED
Jul 01, 2004 08:00 AM
Secretary of State

Principal Place of Business

521 OLD DIXIE HWY TEQUESTA, FL 33469 Mailing Address

521 OLD DIXIE HWY TEQUESTA, FL 33469



06222004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0844268 Applied For Not Applicable

5. Certificate of Status Desired

**/** \$8

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROTHENBERG, JUDITH A 521 OLD DIXIE HWY TEQUESTA, FL 33469

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12002011,12 00400			IN THIS SPACE		
8. The above the obliga	e named entity submits this statement for the tions of registered agent.	e purpose of changing its registered	office or	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and to	tile of applicable. (NOTE, Registered )	gent signatur	e required when revisiating)	DAYE
	LE NOW!!! FEE IS \$150.00 ue by September 5, 2004	Election Campaign Financ     Trust Fund Contribution.	gni	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIR	ECTORS			<u> </u>
NAME STREET ADDRESS CITY-ST-ZIP	PTD ROTHENBERG, BRUCE M 521 OLD DIXIE HWY TEQUESTA, FL 33469 SVD				000000162957 07/01/04-80001-005 158.75
ntle Name Street address City-St-JP	ROTHENBERG, JUDITH A 521 OLD DIXIE HWY TEQUESTA, FL 33469				
HILE NAME STREET ADDRESS CHY-ST-ZP				DO	NOT WRITE
THE P NAME STREET ADURESS CRY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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)(f), 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 tive 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 approvised.

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED WATE OF SIGNAND OF THE PLOT AND TYPETON

6/22/04 S61-743-9974