

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000059731

1. Entity Name
E-INTERACTIVE DEVELOPMENT CORPORATION



Principal Place of Business
**4370 NAUTILUS DR
MAIMI BEACH, FL 33140 US**

Mailing Address
**4370 NAUTILUS DR
MAIMI BEACH, FL 33140 US**



01142004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0905062

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GORDON, LEWIS G
4370 NAUTILUS DR
MAIMI BEACH, FL 33140**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

**000000067975
02/27/04-80021-012 150.00**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
QUINN, BRUCE
7562 SOUTHGATE BOULEVARD
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
QUINN, ANDREW
7562 SOUTHGATE BOULEVARD
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
QUINN, SHERI
7562 SOUTHGATE BOULEVARD
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
QUINN, DENNIS
7562 SOUTHGATE BOULEVARD
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: **BRUCE QUINN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/04 305531-7111

Date Daytime Phone #