2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 19, 2004 08:00 AM Secretary of State

DOCUMENT # P9800 1. Entity Name PETZOLD NEW YORK, INC.								
Principal Place of Business 1410 W 24TH ST MIAMI BEACH, FL 33140	Mailing Address 1410 W 24TH ST MIAMI BEACH, FL 33140							
		and the second of the second o						



07152004	No Chg-P	CR2E034 (10/03)			
4. FE) Number	r	Applied For			
65_0866	3053	Not Applied			

5. Certificate of Status Desired

\$8.75 Additional

DO NOT WRITE

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

SIGNATURE: ULRICH PETZOLD SIGNATURE OF SIGNING OFFICER OR DIRECT

PETZOLD, HANS U 1410 W 24 STREET MIAMI, FL 33140 IN THIS SPACE

	named entity submits this statement for the forms of registered agent.	purpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Flor	ida. I am familiar with	, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and fit	le if applicable (NOTE: Registered	Agent signature	required when reinstating)		DATE	.=
FILE NOWII: FEE IS \$150.00 Due by September 8, 2004 9. Election Campaign Finan Trust Fund Contribution.		cing 🗆	\$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.	ÖFFICERS AND DIR	ECTORS "				TTHERES	
TATLE NAME STREET ADDRESS CITY-ST-ZIP	D PETZOLD, ULRICH 1410 W 24TH ST MIAMI BEACH, FL 33140				477) 979 4-	-80007-004 [50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- ' '				 :	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	= RITE	
TITLE NAME STREET ADDRESS CRY-ST-ZIP				IN .	THIS SP	ACE	
TITLE NAME SIRSET ADDRESS CITY-ST-ZIP			1. □ 1.12			=	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							· .
12. I hereby of indicated of the corporated	certify that the information supplied with this I on this report or supplemental report is true reporation or the receiver or trustee empower , or on an attachment with an address, with	silling does not qualify for the exer e and accurate and that my signat ed to execute this report as paguin all other like empowered.	notion state ure shall haved by Chap	d in Section 119.07(3) ve the same legal elfe ter #07, Florida Statut	(f), Florida Statutes. I ct as if made under o es; and that my name	further certify that the ath; that I am an office appears in Block 10	information or or director or Block 11 if