

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 24, 2004 8:00 am
Secretary of State

04-30-2004 90252 004 ***158.75

DOCUMENT # P99000007208

1. Entity Name
RELLIG, INC.



Principal Place of Business

**975 41ST STREET
SUITE 401
MIAMI BEACH, FL 33140 US**

Mailing Address

**975 41ST STREET
SUITE 401
MIAMI BEACH, FL 33140 US**

66423728



01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0895147

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GILLER, NORMAN M
975 41ST STREET
SUITE 401
MIAMI BEACH, FL 33140**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity admits 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

[Signature] Pres.

4/26/04

Signature, typed or printed name of registered agent, or both, as applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GILLER, NORMAN
C/O 975 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GROSSMAN, ANITA G
C/O 975 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GILLER, IRA
C/O 975 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

[Signature] Pres.

5/19/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #