2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024892

Entity Name: 87 CO.

FILED Feb 11, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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17275 COLLINS AVE PH #4 17275 COLLINS AVE PH4 SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

17275 COLLINS AVE PH #4 17275 COLLINS AVE PH4 SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

FEI Number: 65-0988106 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARAK, BARRY
17275 COLLINS AVE PH #4
SUNNY ISLES BEACH, FL 33160 US
BARAK, BARRY
17275 COLLINS AVE PH4
SUNNY ISLES BEACH, FL 33160 US

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.

SIGNATURE: BARRY BARAK 02/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: BARAK, BARRY Name: BARAK, BARRY

Address: 17275 COLLINS AVE PH#4
City-St-Zip: SUNNY ISLES BEACH, FL 33160
Address: 17275 COLLINS AVE PH4
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D () Delete Title: D (X) Change () Addition

Name: BARAK, HELEN Name: BARAK, HELEN

Address: 17275 COLLINS AVE PH#4 Address: 17275 COLLINS AVE PH4
City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: P () Delete Title: () Change () Addition

 Name:
 CHOLODOFSKY, SHARON
 Name:

 Address:
 17275 COLLINS AVE PH4
 Address:

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELEN BARAK D 02/11/2005