

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000028243

FILED
Feb 24, 2004
Secretary of State

Entity Name: ACCOUNT INTERNATIONAL CORP.

Current Principal Place of Business:

1516 E. COLONIAL DR., STE 102
#107
ORLANDO, FL 328034733

New Principal Place of Business:

Current Mailing Address:

1516 E. COLONIAL DR., STE 102
#107
ORLANDO, FL 328034733

New Mailing Address:

FEI Number: 59-3565587 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORTIGLIATTI, FERNANDA
6131 SAINT IVES BOULEVARD
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PORTIGLIATTI, ANTHONY B
Address: 6131 SAINT IVES BLVD
City-St-Zip: ORLANDO, FL 32819

Title: VPD () Delete
Name: WAISSMANN, LUIZ
Address: 8353 LAKE CROWELL CIR
City-St-Zip: ORLANDO, FL 32836

Title: S () Delete
Name: WAISSMANN, CLEIDE
Address: 8761 ALEGRE CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: DT () Delete
Name: MAIA, PAULO R
Address: 3837 DOUBLE EAGLE DR
City-St-Zip: ORLANDO, FL 328393521

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: MAIA, PAULO R
Address: 3837 DOUBLE EAGLE DR. #2722
City-St-Zip: ORLANDO, FL 32837

Title: DT (X) Change () Addition
Name: PORTIGLIATTI, FERNANDA G
Address: 6131 SAINT IVES BLVD.
City-St-Zip: ORLANDO, FL 32819

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: ANTHONY B. PORTIGLIATTI

PD

02/24/2004

Electronic Signature of Signing Officer or Director

_____ Date