

# 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT # P99000083730**

1. Entity Name  
**2221 CORPORATION**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

04 JUL 16 AM 11:33

Principal Place of Business  
**9801 COLLINS AVENUE APT. 7C  
BAL HARBOUR, FL 33154**

Mailing Address  
**9801 COLLINS AVENUE APT. 7C  
BAL HARBOUR, FL 33154**

2. Principal Place of Business  
**13060 SW 106th Street**

3. Mailing Address  
**13060 SW 106th Street**

Suite, Apt. #, etc.

City & State  
**Miami**

City & State  
**Miami**

Zip  
**33186**

Country  
**USA**

Zip  
**33186**

Country  
**USA**



07062004 Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0950521**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**LIBERMAN, LEA #  
2699 STERLING ROAD, SUITE A-305  
FT LAUDERDALE, FL 33312**

7. Name and Address of New Registered Agent

Name  
**Steven C. Elkin, Esq.**

Street Address (P.O. Box Number is Not Acceptable)  
**Frank, Weinberg & Black, P.L.**

**7805 S.W. 6th Court**

City  
**Plantation**

FL Zip Code  
**33324**

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 *[Signature]* DATE **7/7/04**

(NOTE: Registered Agent signature required when reinstating)

**Amended AR is \$61.25**

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SELEVAN, JERALD 9801 COLLINS AVENUE, APT. 7C BAL HARBOUR, FL 33154	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T/D Martin, Ivan 13060 S.W. 106th Street Miami, FL 33186	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARTIN, IVAN 13060 SW 106TH STREET MIAMI, FL 33186	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>000039535510</b> <b>07/26/04--01068--011 **61.25</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARTIN, LUISA 13060 SW 106TH STREET MIAMI, FL 33186	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SELEVAN, TRUDY 9801 COLLINS AVENUE APT. 7C MIAMI BEACH, FL 33154	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]* **IVAN B. MARTIN** DATE: **7/7/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR