

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090670

FILED  
Apr 15, 2004  
Secretary of State

**Entity Name:** DOUGH BALLS MALLORY SQUARE, INC.

**Current Principal Place of Business:**

CABLE HOUSE-MALLORY SQUARE  
P O BOX 4057  
KEY WEST, FL 33041

**New Principal Place of Business:**

**Current Mailing Address:**

CABLE HOUSE-MALLORY SQUARE  
P O BOX 4057  
KEY WEST, FL 33041

**New Mailing Address:**

**FEI Number:** 65-0948609      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

POVLITZ, WILLIAM G ESQ.  
1207 THIRD STREET SOUTH, STE.5  
NAPLES, FL 33940 US

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

KIMBERLING, GARYANNE  
1300 15TH CT #48  
KEY WEST, FL 33040 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: GARYANNE KIMBERLING, EA      04/15/2004  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PVS ( ) Delete  
Name: JIGARJIAN, EDWARD N  
Address: P O BOX 4057  
City-St-Zip: KEY WEST, FL 33041

Title: TD ( ) Delete  
Name: JIGARJIAN, EDWARD N  
Address: P O BOX 4057  
City-St-Zip: KEY WEST, FL 33041

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: EDWARD N JIGARJIAN      PRES      04/15/2004  
Electronic Signature of Signing Officer or Director      Date