## 2004 FOR PROFIT CORPORATION

## FILED May 04, 2004 8:00 am Secretary of State 05-04-2004 90196 048 \*\*\*150.00

## ANNUAL REPORT

DOCUMENT # P99000097422 1 378 SOUTH OCEAN BLVD., INC. Principal Place of Business Mailing Address 24068333 980 NORTH FEDERAL HIGHWAY 980 NORTH FEDERAL HIGHWAY SUITE 200 SUITE 200 BOCA RATON, FL 33432 BOCA RATON, FL 33432 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04202004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) Suite 200 8. The above named entity submits this statement fog 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 age (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE CÓMPARATO, JAMES NAME MAME STRUET ADDRESS 980 NORTH FEDERAL HIGHWAY SUITE 200 STREET ADDRESS BOCA RATON, FL 33432 CITY-ST-7IP -0117 - S1 - ZIP ☐ Delete TITLE Change ☐ Addition HILL NAME STRUET ADDRESS STREET ADDRESS JIG ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition ITHE BAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 000 ST-7IP □ Change 31111 Delete TITLE ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP UTTY ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME: STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplier entails 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 trystee 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 a

SIGNATURE: