


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000100557 1. Entity Name GENCO FINANCIAL SERVICES, INC.	
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Principal Place of Business 1176 THATCH LN. SUMMERLAND, FL 33042	Mailing Address 1176 THATCH LN. SUMMERLAND, FL 33042
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DO NOT WRITE IN THIS SPACE



07162004 No Chg-P CR2E034 (10/03)

4. FEI Number 52-2208452	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent JENZANO, HARRY J JR 3640 N. FEDERAL HWY. LIGHTHOUSE, FL 33064

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SYLVESTER, ANTHONY 102 SALISBURY DR CANONSBURG, PA 15317
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

100000167473
07/20/04-80006-006 150.00

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:  **7/16/04 724-746-0705**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #