

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90365 036 ***150.00

DOCUMENT # S87062

1. Entity Name
CMP ENTERPRISES, INC.



Principal Place of Business
P. O. BOX 66716
ST. PETERSBURG, FL 33736
ST PETE BEACH

Mailing Address
P. O. BOX 66716
ST. PETERSBURG, FL 33736
ST PETE BEACH

14004315



DO NOT WRITE IN THIS SPACE

02212004 No Chg-P CR2E034 (10/03)

4. FEI Number **59-3088461** Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PAYBERG, CARL M.
5948 SEABIRD DRIVE SOUTH
ST. PETERSBURG, FL 33707

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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
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PAYBERG, CARL M.
STREET ADDRESS	5948 SEABIRD DRIVE S.
CITY-ST-ZIP	ST. PETERSBURG, FL

TITLE	D
NAME	PAYBERG, GERALDINE
STREET ADDRESS	5948 SEABIRD DRIVE S.
CITY-ST-ZIP	ST. PETERSBURG, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:

Carl Payberg **CARL PAYBERG**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **PRESIDENT**

4/14/04 (727) 459-2270
Date Daytime Phone #