
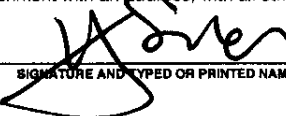


2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90034 035 ***150.00

DOCUMENT # V38986 1. Entity Name CANEEL BAY MANAGEMENT, INC.					
Principal Place of Business 4440 PGA BLVD. SUITE 402 PALM BEACH GARDENS, FL 33410 US			Mailing Address 1 RICHMOND SQUARE STE 100C PROVIDENCE, RI 02906 US		
2. Principal Place of Business 13844 LeBateau Isle		3. Mailing Address Suite, Apt. #, etc. Frenchman's Creek			
City & State Palm Beach Gardens, FL³		City & State Providence, RI			
Zip 33410	Country USA	Zip 02906	Country USA	4. FEI Number 65-0334447	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SCHEIN, HAROLD I. FRENCHMAN'S CREEK 13844 LE BATEAU ISLE PALM BEACH GARDENS, FL 34410			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May-1, 2004-Fee-will be \$550.00.		9. Election Campaign Financing <input type="checkbox"/> \$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	P SCHEIN, HAROLD 1 RICHMOND SQUARE PROVIDENCE, RI 02906	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT SCHEIN, PHILIP 1 RICHMOND SQUARE PROVIDENCE, RI 02906	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SCHEIN, MICHAEL 1 RICHMAOND SQUARE PROVIDENCE, RI 02906	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHEIN-FONTAINE, LESLIE 1 RCIMOND SQUARE PROVIDENCE, RI 02906	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHEIN, MICHAEL 1 RICHMOND SQUARE PROVIDENCE, RI 02906	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHEIN, HAROLD I 1 RICHMONS SQUARE PROVIDENCE, RI 02906	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13844 LeBateau Isle, Frenchman's Creek Palm Beach Gardens, FL 33410				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1 Richmond Square, Suite #100C				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1 Richmond Square, Suite #100C				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1 Richmond Square, Suite #100C				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13844 LeBateau Isle, Frenchman's Creek Palm Beach Gardens, FL 33410				
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:  Harold I. Schein 1/14/04 (401) 521-3000 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					



01072004 Chg-P CR2E034 (10/03)