2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State
04-19-2004 90317 044 ***150.00

DOCUMENT # V45730

1. Entity Name
STUDIN & ASSOC. INC.

DEPARTMENT OF STATE FOR DEPOSIT ONLY ACCT. # 100008786 APR 19 2004

Principal Place of Business
~~301 174 ST~~
~~SUITE 2417,~~
~~SUNNY ISLES BEACH, FL 33160~~ US

Mailing Address
~~301 174 ST~~
~~SUITE 2417~~
~~SUNNY ISLES BEACH, FL 33160~~ US

94000-

2. Principal Place of Business	3. Mailing Address
18031 BISCAYNE BLVD.	18031 BISCAYNE BLVD.
Suite, Apt. #, etc. #1903 TOWER 3 SOUTH	Suite, Apt. #, etc. #1903 TOWER 3 SOUTH
City & State AVENTURA, FL.	City & State AVENTURA, FL
Zip 33160 Country USA	Zip 33160 Country USA

04142004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0339350 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GOLDBERG, LOUIS
301 174 ST
SUITE 2417
SUNNY ISLES BEACH, FL 33160

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V GOLDBERG, LOUIS ~~301 174TH ST, #2417~~ ~~SUNNY ISLE BEACH, FL 33160~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 18031 BISCAYNE BLVD. #1903 AVENTURA, FL 33160
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STUDEN, SIDNEY D 18071 BISCAYNE BLVD. #1204 AVENTURA, FL 33180 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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: [signature] (LOUIS GOLDBERG) 4/15/04 305 931 7427
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #