

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V53190

FILED
Apr 07, 2004
Secretary of State

Entity Name: CEZAR ENTERPRISE, INC.

Current Principal Place of Business:

4484 MUSSELSHELL DR
NEW PORT RICHEY, FL 34655 US

New Principal Place of Business:

6015 BAREFOOT CT
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

4844 MUSSELSHELL DR
NEW PORT RICHEY, FL 34655 US

New Mailing Address:

6015 BAREFOOT CT
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3134500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIODUSZEWSKI, CEZARY
4844 MUSSELSHELL DR
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

MIODUSZEWSKI, CEZARY
6015 BAREFOOT CT
NEW PORT RICHEY, FL 34652 US

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.

SIGNATURE:

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MIODUSZEWSKI, CEZARY
Address: 4844 MUSSELSHELL DR
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: MIODUSZEWSKI, KATARZYNA
Address: 4844 MUSSELSHELL DR
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MIODUSZEWSKI, CEZARY
Address: 6015 BAREFOOT CT
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change () Addition
Name: MIODUSZEWSKI, KATARZYNA
Address: 6015 BAREFOOT CT
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CEZARY MIODUSZEWSKI

P

04/07/2004

Electronic Signature of Signing Officer or Director

Date