

2004 FOR PROFIT CORPORATION ANNUAL REPORT

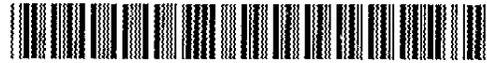
FILED
Mar 10, 2004 08:00 AM
Secretary of State

DOCUMENT # V66673
 1. Entity Name
ALLAN A. KOZICH & ASSOCIATES, INC.



Principal Place of Business Mailing Address
 1220 NE 4TH AVENUE 1220 NE 4TH AVENUE
 FORT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33304

DO NOT WRITE IN THIS SPACE



01162004 No Chg-P CR2E034 (10/03)

| | |
|---|---------------------------------------|
| 4. FEI Number 65-0482674 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
 KOZICH, ALLAN
 1220 N.E. 4TH AVENUE
 FT. LAUDERDALE, FL 33309

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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 _____ (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

U00000083348
 03/10/04-80035-021 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD KOZICH, HAYDEE L 1220 N.E. 4TH AVENUE FT. LAUDERDALE, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VTD KOZICH, ALLAN A 1220 N.E. 4TH AVENUE FT. LAUDERDALE, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

DO NOT WRITE 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)(f), 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: *Allan A. Kozich* **Allan A. Kozich, V.P.** 01/21/04 854-764-0535

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #