

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V72650

FILED
Apr 29, 2004
Secretary of State

Entity Name: ANAGNOSTOU ENTERPRISES, INC.

Current Principal Place of Business:

1100 N. BLVD. WEST
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

912 BELLE OAK DRIVE
APT. 121
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 59-3153790 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANAGNOSTOU, MONA L VS
912 BELLE OAK DRIVE
APARTMENT 121
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ANASNOSTOU, KOSTAS
Address: 912 BELLE OAK DRIVE, APT. 121
City-St-Zip: LEESBURG, FL 34748

Title: VS () Delete
Name: ANASNOSTOU, MONA LISA
Address: 912 BELLE OAK DRIVE, APT. 121
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MONALISA ANAGNOSTOU

VS

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date