

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090585

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: 54TH AVENUE EAST REALTY CORP.

## Current Principal Place of Business:

5990 54TH AVENUE NORTH  
ST. PETERSBURG, FL 33709

## New Principal Place of Business:

6333 54TH AVENUE NORTH  
ST. PETERSBURG, FL 33709

## Current Mailing Address:

5990 54TH AVENUE NORTH  
ST. PETERSBURG, FL 33709

## New Mailing Address:

6333 54TH AVENUE NORTH  
ST. PETERSBURG, FL 33709

FEI Number: 59-3602638

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HASSAN, KAZI  
5990-54TH AVE. NO  
SAINT PETERSBURG, FL 33709 US

## Name and Address of New Registered Agent:

HASSAN, KAZI  
6333-54TH AVE. NO  
SAINT PETERSBURG, FL 33709 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:

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HASSAN, KAZI DR.  
Address: 5990 54TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33709

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DR. KAZI HASSAN

D

04/19/2004

Electronic Signature of Signing Officer or Director

Date