2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: JANET GARWOOD JAWE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICERY OR DERECTOR

FILED Apr 13, 2004 8:00 am Secretary of State

970 925 8940 x 290

DOCUMENT # 344938 1. Entity Name FUN TIME INTERNATIONAL, INC.					04-13-2004 90032 038 ***158.75					
Principal Place	e of Business			,						
1101 S.W. 15 DEERFIELD B	STH STREET SEACH, FL 33441 US	1101 S.W. 15TH STREET DEERFIELD BEACH, FL 33441-6241 US				្នំខ្លួ	700 V 440			
1040	lace of Business o 5. Fart Harrison	3. Mailing Address AVE 1046 5. F	E 1046 S. FORT HARRISON							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		040	52004	Chg-P	CR2E034 (10/03)			
City & State		City & State CEAR WATER FL			El Number 59-2453		Applied For Not Applicable			
Zip	Country	Zip	Country			f Status Desired		8.75 Add	litional	
3373			<u>usa</u>				_ F	ee Required	<u> </u>	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SAME								jent		
PLETTS, DONALD C 1101 S.W. 15TH STREET				Street Address (P.O. Box Number is Not Acceptable)						
DEERFIELD BEACH, FL 33441-6241					n = 11/	ARRISON	AVE	#2		
							EL			
City CLEAR WATER FL Zip Code 33 756 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required					nstating)		DATE			
				<u> </u>						
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Fi Trust Fund Contribution				\$5.00 M Added to F			b akta t	1 - F		
10.	OFFICERS AND D	IRECTORS	11.	ADI	DITIONS/C	HANGES TO O	FFICERS AND	DIRECTORS	3 IN 11	
TITLE NAMÉ	VPD	☐ Delete	TITLE	5AM		i		Change	Addition	
STREET ADDRESS				STREET ADDRESS 1046 SO. FORT HARRISON AVE. #2						
CITY-ST-ZIP	DEERPIELD BEACH, FL 334416241.					rere,				
TITLE	PD	☐ Delete	TILE			,		Change	Addition	
NAME : STREET ADDRESS	GARWOOD, JANET 410 NORTH MILL STREET / P.O.	NAME STREET ADDRESS								
CITY-ST-ZIP						į				
TITLE	SD	☐ Delete	TITLE			-	,	Change	Addition	
NAME	GARWOOD, DONALD		NAME							
STREET ADDRESS CITY-ST-ZIP	3703 DAY AVE 10 MIAMI, FL 33Q33490		STREET ADDRESS CITY-ST-ZIP							
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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 Statute's. 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.										