2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State 04-26-2004 90496 042 ***158.75

(407) 365-2111

Daytime Phone #

4/15/04

Date

1. Entity Name	USTRIES, INC.			04-20-2	1	36.73	
Principal Place of Business 1975 W. STATE RD 426 OVIEDO, FL 32765 US		Mailing Address P.O. BOX 620257 OVIEDO, FL 32762-0257 US		540	39719	818 11881 1 5381	
2. Principal Pla	ace of Business	3. Mailing Address	——————————————————————————————————————				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01062004 Chg-P	CR2E034 (10/0)	3)	
City & State		City & State		4. FEI Number 59-1424021		Applied For Not Applicable	
Zìp	Country	Zip	Country	5. Certificate of Status De	esired 🕱 \$8.75 /		
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of	New Registered Agent		
CHAPMAN, TRACY D 1975 W STATE RD 426 OVIEDO, FL 32765				Street Address (P.O. Box Number is Not Acceptable)			
			City		FL Zip C	ode	
the obligation	named entity submits this statement for ons of registered agent. Signature, typed or printed name of registered agen		registered office or re	•	ite of Florida. I am familiar w	ith, and accept	
After Ma	E NOW!!! FEE IS \$150.00 by 1, 2004 Fee will be \$550.			\$5.00 May Be Added to Fees			
10.	V OFFICERS AND	DIRECTORS Delete	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRECT		
NAME STREET ADDRESS CITY-ST-ZIP	DUDA, ANDREW L. 1975 W STATE RD. 426 QVIEDO, FL 32765	L.J Delois	NAME STREET ADDRESS CITY-ST-ZIP			go	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPT DUDA, DAVID J 1975 W STATE RD. 426 OVIEDO, FL 32765	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chan	ge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHAPMAN, TRACY D 1975 WEST STATE RD 426 OVIEDO, FL 32765	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Chan	nge 🗋 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DUDA,FERDINAND S. 1975 W STATE RD. 426 OVIEDO, FL 32765	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chan	rge 🗀 Addition	
THTLE NAME STREET ADDRESS CITY-ST-ZIP	AT CLARK, HENRY L 1975 W. STATE ROAD 426 OVIEDO, FL 32765	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Char	nge 🗌 Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	AT KINDER, MARK 1975 W STATE RD OVIEDO, FL 32765	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1975 W. State Roa			
12. I hereby indicated of the corchanged	certify that the information supplied with on this report or supplemental report poration or the receiver or trastes em, or on an attachment with an addless	th this filing does not qualify for is true and accurate and that powered to execute this repor , with all other like empowered	or the exemption state my signature shall ha t as required by Chap t.	d in Section 119.07(3)(i), Florida S re the same legal effect as if mad- ter 607, Florida Statutes; and that	tatutes. I further certify that t a under oath; that I am an off my name appears in Block	he information ficer or director 10 or Block 11 if	

Ferdinand S. Duda, President

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHFOCHMENT HONLOSI 151039109

DUDA INDUSTRIES, INC.

Federal I.D. No. 59-1424021

ADDITIONAL OFFICERS

NAME	TITLE	<u>ADDRESS</u>	CITY/STATE/ZIP
WEEKS, Palmer B.	Assistant	1975 W. State	Oviedo
	Secretary	Road 426	FL 32765
DUDA, Joseph A.	Director	1975 W. State Road 426	Oviedo FL 32765
Engwall, Mark	Assistant	1975 W. State	Oviedo
	Treasurer	Road 426	FL 32765