


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2004 08:00 AM
Secretary of State

DOCUMENT # 592862
 1. Entity Name
WASILEWSKI ENTERPRISES, INC.



Principal Place of Business
**1520 CHATEAU WOODS DR
 CLEARWATER, FL 33764 US**

Mailing Address
**1520 CHATEAU WOODS DR
 CLEARWATER, FL 33764 US**

DO NOT WRITE IN THIS SPACE



09012004 No Chg-P CR2E034 (10/03)

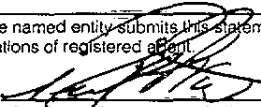
4. FEI Number
59-1989786 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**WASILEWSKI, RICHARD
 1520 CHATEAU WOODS DR.
 CLEARWATER, FL 33764**

DO NOT WRITE IN THIS SPACE

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  DATE **8/31/04**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

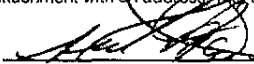
10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PT WASILEWSKI, RICHARD 1520 CHATEAU WOODS DR CLEARWATER, FL 33764 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VPS WASILEWSKI, CAROL 1520 CHSTEAU WOODS DR CLEARWATER, FL 33764 |
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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 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, title, or other like empowered.

SIGNATURE:  DATE **8/31/04** DAYTIME PHONE # **727-531-8004**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR