2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 02, 2004 08:00 AM = Secretary of State DOCUMENT # G38064 APPLICATION PROCESSING SERVICE, INC. Principal Place of Business Mailing Address 207 CRYSTAL GROVE BLVD 207 CRYSTAL GROVE BLVD LUTZ, FL 33549 US LUTZ, FL 33549. US 01122004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2345615 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LAZZARA, JOHN J. DO NOT WRITE 706 MOODY AVE., SOUTH TAMPA, FL 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, typed or printed name of registered agent and title it applicable (NOTE. Registered Apont signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS CDT TITLE GUASTELLA, JOHN R. NAME STREET ADDRESS 19309 N. HIGHWAY 41 CITY-ST-ZIP LUTZ, FL --11000000101248 SITE 04/02/04-80005-014 150.00 GUASTELLA, ROSEMARY NAME STREET ADDRESS 19309 N. HIGHWAY 41 CITY-ST-ZIP LUTZ, FL TITLE MARSE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP BITLE IN THIS SPACE

12. Thereby 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 comporation or the receiver or thistel empowered to supply 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 attach freely with an address, with at other the empowered.

SIGNATURE:

NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS CRY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED