2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2004
Secretary of State

DOCUMENT# J81566

Entity Name: NORTH AMERICAN MODULAR SYSTEMS, INC.

Current Principal Place of Business:

260 SW 12 AVENUE
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

Current Mailing Address:

260 SW 12TH AVE
DEERFIELD BEACH, FL 33442 US

New Mailing Address:

FEI Number: 65-0005353 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FISKE, BARRY
10855 AVENIDA SANTA ANA
BOCA RATON, FL 33498

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FISKE, BARRY,
Address: 10855 AVENIDA SANTA ANA
City-St-Zip: BOCA RATON, FL

Title: TS ( ) Delete
Name: FISKE, SCOTT
Address: 2261 DEERCREEK ALBA WAY
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: V ( ) Delete
Name: FISKE, BRYAN
Address: 23085-7 AQUA VIEW DR
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TS (X) Change ( ) Addition
Name: FISKE, SCOTT
Address: 23131 L'ERMITAGE CIRCLE
City-St-Zip: BOCA RATON, FL 33433

Title: V (X) Change ( ) Addition
Name: FISKE, BRYAN
Address: 23086-4 ISLAND VIEW DRIVE
City-St-Zip: BOCA RATON, FL 33433

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: BARRY FISKE P 03/02/2004

Electronic Signature of Signing Officer or Director Date