

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004918

FILED
Apr 13, 2004
Secretary of State**Entity Name:** SECOND LEVEL, INC.**Current Principal Place of Business:**14 OLD GROVE LANE
ALTAMONTE SPRINGS, FL 32701**New Principal Place of Business:****Current Mailing Address:**14 OLD GROVE LANE
ALTAMONTE SPRINGS, FL 32701**New Mailing Address:****FEI Number:** 01-0725357**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMITH, WAYNE E
14 OLD GROVE LANE
ALTAMONTE SPRINGS, FL 32701**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**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: SMITH, WAYNE E
Address: 14 OLD GROVE LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701**Title:** D () Delete
Name: FUJIWARA, SOICHI
Address: 14 OLD GROVE LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701**Title:** D () Delete
Name: ISHIMOTO, MAYUMI
Address: 14 OLD GROVE LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE E SMITH

PRES

04/13/2004

Electronic Signature of Signing Officer or Director_____
Date