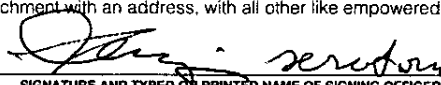


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90035 011 ****61.25

DOCUMENT # N93000000809 1. Entity Name MEGAS ALEXANDROS, INC.					
Principal Place of Business 125 SOUTH HOLLYWOOD AVE. DAYTONA BEACH FL 32118			Mailing Address P.O. BOX 5103 DAYTONA BEACH FL 32118		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3176889 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DIMITRIOUS, TOMIAS 125 S HOLLYWODD AVE DAYTONA BEACH FL 32118			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____		
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	SPIROS, KOSTARIDIS		NAME		
STREET ADDRESS	319 MOSS AVE		STREET ADDRESS		
CITY-ST-ZIP	HARBOR OAKS FL		CITY-ST-ZIP		
TITLE	VD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	SKANDALAKIS, RENOS		NAME		
STREET ADDRESS	230 N. HALIFAX		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		CITY-ST-ZIP		
TITLE	SD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	DEMETRIOS, TOMAIS		NAME		
STREET ADDRESS	125 SOUTH HOLLYWOOD AVE.		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL 32118		CITY-ST-ZIP		
TITLE	TD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	TOMAS, MARIA		NAME		
STREET ADDRESS	125 S. HOLLYWOOD AVE.		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL 32118		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE	☒ Change ☐ Addition	
NAME	REPPAS, THEODORE		NAME	TSIONGAS CHRISTOPHER	
STREET ADDRESS	2226 MAGNOLIA AVE.		STREET ADDRESS	350 PELICAN AVENUE	
CITY-ST-ZIP	DAYTONA BEACH FL 32119		CITY-ST-ZIP	DAYTONA BEACH, FL 32118	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	KOSTARIDIS, D K		NAME		
STREET ADDRESS	319 MOSS AVE		STREET ADDRESS		
CITY-ST-ZIP	HARBOR OAKS FL		CITY-ST-ZIP		
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date 2/20/04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

03040001



MOORE CR2E037 (11/03)

FL Zip Code

Daytime Phone #