2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000025048

Entity Name: AQUAFIBER TECHNOLOGIES CORPORATION

FILED May 10, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	SIANA AVE., S PARK, FL 327					
Current Mailing Address:			New Mailir	New Mailing Address:		
1150 LOUISIANA AVE., SUITE 5C WINTER PARK, FL 32789						
FEI Number:	59-3647964	FEI Number Applied For()	FEI Number Not Appli	cable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:		
1150 LOÚI SUITE 6 WINTER P	HUGH M ATT SIANA AVE, PARK, FL 327 named entity	89 US	irpose of changing it	s registered office or registered agent, or both,		
in the State						
SIGNATUF		i. Oimadan af Danisland Aman	-1	Dete		
		nic Signature of Registered Ager		Date		
Election Can		(3(2)(b), F.S., the corporation did not grows Fund Contribution ().	-	s. S/CHANGES TO OFFICERS AND DIRECTORS:		
Title:			Title:			
Name: Address: City-St-Zip:	BLAND, G. TH	NA AVE., STE. 5C	Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VD (JENSEN, KYLE 9442 BEAR LA APOPKA, FL 3	KE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	OLSON, MARY 1150 LOUISIAN) Delete 'S MS. NA AVE., STE 5C ,, FL 32789 US	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (BURNS, JOHN 205 ZEAGLER PALATKA, FL	DR., STE 302	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	HARDY, JAMES 1150 LOUISIAN) Delete S E DDS NA AVE., STE 5C I, FL 32789 US	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WRIGHT, KENNETH C ESQ 1150 LOUISIANA AVE., STE 5C WINTER PARK, FL 32789 US		

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: G. THOMAS BLAND, JR. P 05/10/2004

A. KEITH HOLCOMB 1150 LOUISIANA AVE., STE 5C WINTER PARK, FL 32789

GLENN ROGERS DIRECTOR 1150 LOUISIANA AVE., STE 5C WINTER PARK, FL 32789

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