2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029215

Entity Name: MOHIP & BURNETT, P.A.

Apr 21, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

BAYFRONT TOWER 1 BEACH DR. S.E. #304

SAINT PETERSBURG, FL 33701

New Mailing Address: Current Mailing Address:

BAYFRONT TOWER 1 BEACH DR. S.E. #304

SAINT PETERSBURG, FL 33701

SAINT PETERSBURG, FL 33713

SAINT PETERSBURG, FL 33713

2848 5TH AVENUE NORTH

2848 5TH AVENUE NORTH

FEI Number: 59-3645490 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MOHIP, AMINIE **BAYFRONT TOWER** 1 BEACH DR. S.E. #101

SAINT PETERSBURG, FL 33701 US

MOHIP, AMINIE 2848 5TH AVENUE NORTH SAINT PETERSBURG, FL 33713 US

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: 04/21/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: () Delete

MOHIP, AMINIE Name: 101 BEACH DR. S.E. #304 Address:

City-St-Zip: SAINT PETERSBURG, FL 33701

Title: (X) Delete Name: BURNETT, JOHN S 1 BEACH DR. S.E. #304 Address: SAINT PETERSBURG, FL 33701 City-St-Zip:

MOHIP, AMINIE Name: 2848 5TH AVENUE NORTH Address: City-St-Zip: SAINT PETERSBURG, FL 33713

Title: () Change () Addition

Name: Address: City-St-Zip:

Title:

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: AMINIE MOHIP **PRES** 04/21/2004