


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2004 8:00 am
Secretary of State

01-14-2004 90008 021 ***150.00

DOCUMENT # P01000001356	
1. Entity Name DEFRAG CORPORATION	

Principal Place of Business 3000 N UNIVERSITY DRIVE SUITE Q CORAL SPRINGS, FL 33065	Mailing Address 3000 N UNIVERSITY DRIVE SUITE Q CORAL SPRINGS, FL 33065
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01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1066597	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

LOWELL, ROBERT A
 3000 N UNIVERSITY DRIVE
 SUITE Q
 CORAL SPRINGS, FL 33065

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD LOWELL, ROBERT A 3000 N UNIVERSITY DR STE Q CORAL SPRINGS, FL 33065
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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 607, 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: Robert Lowell, Pres **ROBERT LOWELL, PRES** 1/8/04 954-340-5442
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #