2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# P01000122025

Entity Name: PRECISION MAPPING & RESEARCH, INC.

Current Principal Place of Business:

POST OFFICE BOX 22322
WEST PALM BEACH, FL 33422

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 22322
WEST PALM BEACH, FL 33422

New Mailing Address:

FEI Number: 90-0000917 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KING, MATTHEW
13254 73 ST N
WEST PALM BEACH, FL 33412 US

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FLEMING, KERRY
Address: POST OFFICE BOX 223322
City-St-Zip: WEST PALM BEACH, FL 33422

Title: D ( ) Delete
Name: RANDER, DAVID G
Address: POST OFFICE BOX 223322
City-St-Zip: WEST PALM BEACH, FL 33422

Title: D ( ) Delete
Name: KING, MATTHEW A
Address: POST OFFICE BOX 223322
City-St-Zip: WEST PALM BEACH, FL 33422

Title: D ( ) Delete
Name: SEEKY, JERRY
Address: PO BOX 22322
City-St-Zip: WEST PALM BCH, FL 33422

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:

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

SIGNATURE: MATTHEW KING D 04/30/2004

Electronic Signature of Signing Officer or Director — Date