2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2004
Secretary of State

DOCUMENT# P02000038835

Entity Name: EYESPIKE CORPORATION

Current Principal Place of Business:

RT 27 BOX 865
LAKE CITY, FL 32004

New Principal Place of Business:

Current Mailing Address:

RT 27 BOX 865
LAKE CITY, FL 32004

New Mailing Address:

FEI Number: 04-3637376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLINT, PHILLIP N
RT 27 BOX 895
LAKE CITY, FL 32024

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: P ( ) Delete
Name: BOATRIGHT, BRIAN K
Address: 214 S MARION AVE
City-St-Zip: LAKE CITY, FL 32025

Title: V ( ) Delete
Name: FLINT, PHILLIP N
Address: ROUTE 27 BOX 895
City-St-Zip: LAKE CITY, FL 32024

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BOATRIGHT, BRIAN K
Address: 214 S MARION AVE
City-St-Zip: LAKE CITY, FL 32025

Title: VD (X) Change ( ) Addition
Name: HESTON, MICHAEL D
Address: 195 SW BILLOWING GLENN
City-St-Zip: LAKE CITY, FL 32024

Title: SD ( ) Change (X) Addition
Name: FLINT, PHILLIP N
Address: ROUTE 27 BOX 895
City-St-Zip: LAKE CITY, FL 32024

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: PHILLIP N FLINT SD 05/01/2004

Electronic Signature of Signing Officer or Director — Date