2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P02000053225

Entity Name: REEL EQUIPMENT EAST, INC

Current Principal Place of Business:

345 MINOLA DR
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

Current Mailing Address:

345 MINOLA DR
MIAMI SPRINGS, FL 33166

New Mailing Address:

8004 NW 154 STREET
379
MIAMI LAKES, FL 33016

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOLEY, WILLIAM MR
MINOLA DR
MIAMI SPRINGS, FL 33166 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: P ( ) Delete
Name: FOLEY, WILLIAM J MR
Address: 245 MINOLA DR
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: S ( ) Delete
Name: FOLEY, WILLIAM J MR
Address: 14799SW 176 STREET
City-St-Zip: MIAMI, FL 33187

Title: T ( ) Delete
Name: FOLEY, WILLIAM J MR
Address: 14799SW 176 STREET
City-St-Zip: MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FOLEY, WILLIAM J MR
Address: 345 MINOLA DR
City-St-Zip: MIAMI SPRINGS, FL 33166

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: WILLIAM FOLEY P 04/29/2004

Electronic Signature of Signing Officer or Director Date