## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000064429

Entity Name
 EXTRA TEXTURE, INC.

Principal Place of Business Mailing Address

3500 WASHINGTON ST SUITE 514-A HOLLYWOOD, FL 33021 3500 WASHINGTON ST SUITE 514-A HOLLYWOOD, FE 33021 FILED Apr 22, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04892004 No Chg-P 4. FEI Number 38-3651991		CR2E034 (10/03)		
			Applied For	
			Not Applicable	
5. Certificate of	of Status Desired		\$8.75 Additional	

6. Name and Address of Current Registered Agent

PRYOR, DENVER LANIER II 3500 WASHINGTON ST SUITE 514-A HOLLYWOOD, FL 33021

SIGNATURE: 1

## DO NOT WRITE IN THIS SPACE

			IN ITIIS SPACE	
The above named entity submits this statement the obligations of registered agent.	it for the purpose of changing its register.	ad office or registered age	nt, or both, in the State of Florida. I am familiar with, and	accept
SIGNATURE Signature, typed or printed name of registered at	gent and title if applicable (NOTE, Registere	d Agent signalure required whon rein	nstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$55	9. Election Campaign Final Trust Fund Contribution.		uy Be U00000124331 04/22/04-80041-009 150.0	 10
TITLE D	ND DIRECTORS			
NAME PRYOR, DENVER LANIER II SITTEST ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021				
TIRLE NAME STRIET ADDRESS CNY-ST-ZIP			. — —	
HITLE NAME STREET ADDRESS CITY- ST- ZIP			DO NOT WRITE	
TITLE PAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE	
TIFLE NAME STREET ADDRESS CITY-ST-2P				
TITLE NAME STREET ADDRESS CHY-ST-2IP				
<ol> <li>I hereby certify that the information supplied indicated on this report or supplemental repor- tiful corporation or the receiver or trusted e changed, or on an attachment with an addire</li> </ol>	with this filling does not qualify for the exert is true and accurate and that my signal mpowered to execute this report as requises, with all other like empowered.	emption stated in Section 1 sture shall have the same le ked by Chapter 607, Florid	19.07(3)(I), Florida Statutes, I further certify that the informed all effect as it made under oath, that I am an officer or dia Statutes; and that my name appears in Block 10 or Block.	ration irector ck ( ) il