

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082863

Entity Name: EBS ENTERPRISES, INC.

FILED
Feb 12, 2004
Secretary of State

Current Principal Place of Business:

1938 RADCLIFF AVE. S.E.
PALM BAY, FL 32909

New Principal Place of Business:

2326 ANGEL ROAD SE
PALM BAY, FL 32909

Current Mailing Address:

1938 RADCLIFF AVE. S.E.
PALM BAY, FL 32909

New Mailing Address:

2326 ANGEL ROAD SE
PALM BAY, FL 32909

FEI Number: 20-0119571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANNON, BARBARA
1938 RADCLIFF AVE. S.E.
PALM BAY, FL 32909

Name and Address of New Registered Agent:

SHANNON, ERIC
2326 ANGEL ROAD SE
PALM BAY, FL 32909

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: ERIC SHANNON

02/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHANNON, BARBARA
Address: 1938 RADCLIFF AVE. S.E.
City-St-Zip: PALM BAY, FL 32909

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SHANNON, ERIC
Address: 2326 ANGEL ROAD
City-St-Zip: PALM BAY, FL 32909

Title: DST () Change (X) Addition
Name: SHANNON, BARBARA
Address: 2326 ANGEL ROAD
City-St-Zip: PALM BAY, FL 32909

Title: D () Change (X) Addition
Name: MODUGNO, STEVEN
Address: 2326 ANGEL ROAD
City-St-Zip: PALM BAY, FL 32909

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: BARBARA SHANNON

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02/12/2004

Electronic Signature of Signing Officer or Director

Date