


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90021 022 ***158.75

DOCUMENT # P03000120543

1. Entity Name
ENTOOMUFREET, INC.



Principal Place of Business
**5111 20TH STREET WEST
 BRADENTON, FL 34207 US**

Mailing Address
**5111 20TH STREET WEST
 BRADENTON, FL 34207 US**

2. Principal Place of Business
4245 Bee Ridge Road
 Suite, Apt. #, etc.

3. Mailing Address
4245 Bee Ridge Road
 Suite, Apt. #, etc.



05122004 Chg-P CP2E034 (10/03)

City & State
Sarasota, FL

City & State
Sarasota, FL

Zip
34233 Country
Sarasota

Zip
34233 Country
Sarasota

4. FEI Number
20-0345061

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**STODDARD, WENDY A
 5111 20TH STREET WEST
 BRADENTON, FL 34207**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Wendy A Stoddard DATE: 5/11/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW! FEE IS \$150.00
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	STODDARD, WENDY	5111 20TH STREET WEST	BRADENTON, FL 34207	<input type="checkbox"/>
VP	KOSTER, HERMAN	5111 20TH STREET WEST	BRADENTON, FL 34207	<input type="checkbox"/>
T	MEYERS, DEBORAH	3725 BALI DRIVE	SARASOTA, F- 34232	<input type="checkbox"/>
S	GOLD, JESSE	3725 BALI DRIVE	SARASOTA, FL 34232	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wendy A Stoddard DATE: 5/11/04 (941) 349-3688

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR