2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40335

FILED Jul 06, 2004 Secretary of State

Entity Name: CHADWICK INTERNATIONAL, INC.

Current Principal Place of Business:			New Principal Place	e of Business:	
8300 ARLINGTON BLVD. STE B2 FAIRFAX, VA 22031					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
8300 ARLINGTON BLVD. STE B2 FAIRFAX, VA 22031					
FEI Number:	54-1569230	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPROATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US					
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				Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () HENDERSON, 0 3248 CISMOUN WOODBRIDGE	T COURT	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () MEYER, KYLE I 6323 COLCHES FAIRFAX, VA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () PIKOVSKY, DAN 18104 KITCHEN GERMANTOWN	HOUSE CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CD () NOCERA, RONA 3702 DIJON WA PALM BEACH, F	ALD M., AY	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () PYLES, ALAN N 6412 WOODLAI CLIFTON, VA		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	KELLER, ANDR	VIEW TERRACE	Title: Name: Address: City-St-Zip:	() Change() Addition	
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: DAVID PIKOVSKY

T 07/06/2004