2004 FOR PROFIT CORPORATION

Apr 12, 2004 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P94000015010 BSI REAL ESTATE, INC. Principal Place of Business Mailing Address 257 WEST BRANDON BLVD 257 WEST BRANDON BLVD BRANDON, FL 33511 BRANDON, FL 33511 04062004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3228740 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ISBELL, BRYAN DO NOT WRITE 257 WEST BRANDON BLVD BRANDON, FL 33511 IN THIS SPACE 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. Signature, typed or printed name of registered agent and fille if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DΡ TITLE NAME ISBELL, BRYAN A 257 WEST BRANDON BLVD STREET ADDRESS U00000103058 CITY-ST-ZIP BRANDON, FL 33511 04/12/04-80028-007 150.00 TITLE ISBELL, SALLY NAME 257 WEST BRANDON BLVD STREET ADDRESS CITY-ST-ZIP BRANDON, FL 33511 TITLE NALAF. STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PRINTED OFFICER OR DIRECTOR

FILED