


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 31, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000091265  
 1. Entity Name  
 ELECTRON BEAM SOLUTIONS, INC.



Principal Place of Business      Mailing Address  
 720 FENTRESS BLVD., STE. 201      720 FENTRESS BLVD., STE. 201  
 DAYTONA BEACH, FL 32114      DAYTONA BEACH, FL 32114

**DO NOT WRITE IN THIS SPACE**



03262004    No Chg-P    CR2E034 (10/03)

4. FFI Number      Applied For  
 59-3474759      Not Applicable

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

6. Name and Address of Current Registered Agent  
 DIAZ, CARLOS A  
 111 S. ATLANTIC AVE. #1105  
 ORMOND BEACH, FL 32176

**DO NOT WRITE 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 title if applicable      (NOTE: Registered Agent signature required when renewing)      DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$350.00**

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

U00000099772  
 03/31/04-80019-021 159.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DIAZ, CARLOS A
STREET ADDRESS	111 S ATLANTIC AVENUE #1105
CITY- ST- ZIP	ORMOND BEACH, FL 32176
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Carlos Diaz    CARLOS DIAZ    3-26-04    386-274-5700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Day 1 to Phone #