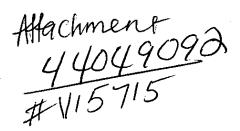
2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 16, 2004 8:00 am Secretary of State **DOCUMENT # V15715** 1. Entity Name EQUUS SERVICE, INC. 07-16-2004 90003 008 ***150.00 cipal Place of Business Mailing Address 3461 NW 16TH CT PO BOX 4874 US OCALA, FL 34475 OCALA, FL 34478 CR2E034 (10/03) No Chg-P 07042004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3115266 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BARNARD, DENNIS L. DO NOT WRITE 3461 NW 16TH CT OCALA, FL 32675 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 reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Due by September 8, 2004 Added to Fees OFFICERS AND DIRECTORS PTV TITLE BARNARD, DENNIS L. NAME 3461 NW 16TH CT STREET ADDRESS CITY-ST-ZIP OCALA, FL S SMITH, PAM STREET ADDRESS 2086 NE 42 ST CITY-ST-ZIP OCALA, FL 34471 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS

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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of the co changed, or on an attachment with an address, with all other like empowered.



FLORIDA DEPT. OF STATE
SECRETARY OF STATE
GLENDA E. HOOD
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FLORIDA 32314

EQUUS SERVICE INC. PO BOX 4874 OCALA, FL. 34478 (352.) 351-3641

DEAR MADAM:

EQUUS SERVICE FILED THE CORPORATION FEE CHECK # 3300 ON

MARCH 9TH, 2004 FOR \$150.00.

WE RECEIVED NO PRIOR NOTICE THAT YOU HAD NOT RECEIVED THIS

CHECK UNTIL NOTICE OF INTENT TO DISSOLVE CORPORATION POST -

CARD WAS RECEIVED ON JULY 3RD, 2004.

WE SPOKE WITH TYRONE AT YOUR OFFICE AND EQUUS IS MAILING YOU

ANOTHER CHECK FOR \$150.00 FOR THE CORPORATION FEE. WE HOPE

THAT YOU WILL WAIVE THE LATE FEE AS WE CAN NOT UNDERSTAND

WHAT COULD HAVE HAPPENED TO OUR ORIGINAL CHECK.

SINCERELY

DL BARNARD, PRES

EQUUS SERVICE INC.

Hachment 44049092 # VI5715

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