2004 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # 486214

Principal Place of Business

SPICE WORLD, INC.

8101 PRESIDENT'S DR. ORLANDO, FL 32809 Mailing Address

8101 PRESIDENT'S DR. ORLANDO, FL 32809

FILED Apr 30, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04262004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1630843

NOREN P. CAVEZA

Applied For Not Applicable

467-851-943.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CANEZA, GARY 8101 PRESIDENTS DR. ORLANDO, FL 32809

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.						
SIGNATURE Signature, Noved or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating). DATE						
Signature: typed of printed name or registated agent and one in applicable (NOTE instructed Agent Signature required with resistantly)						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution			ing 🗆	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO CANEZA, ANDREW P 203 MAGNOLIA LAKE DR. LONGWOOD, FL 32779					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WHITSON, SUSAN C. 315 EASTLAKE BARTLEY DR LONGWOOD, FL 32779			(00000142131 04/30/04-80039-018 150.00		
TITLE HAME STREET ADORESS CITY-SI-ZIP	P CANEZA, GARY R 1318 BRIERCLIFF DR ORLANDO, FL 32806			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CANEZA, ANDREW R 950 SWEETWATER CLUB DR LONGWOOD, FL 32779					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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)(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.						

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