2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2004 08:00 AM Secretary of State **DOCUMENT # 556074** 1. Entity Name RANIERI'S, INC. Mailing Address Principal Place of Business 6412 LAKE SUNRISE 6412 LAKE SUNRISE APOLLO BEACH, FL 33572-2305 APOLLO BEACH, FL 33572-2305 CR2E034 (10/03) 03122004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1789573 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FRANK, LARRY DO NOT WRITE 1028 APOLLO BEACH BLVD #107 IN THIS SPACE APOLLO BEACH, FL 33572 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees U00000143566 10. OFFICERS AND DIRECTORS POT TITLE NAME FRANK, LARRY STREET ADDRESS 1028 APOLLO BEACH BLVD #107 CITY-ST-ZP APOLLO BEACH, FL 33572 TILE NAME STREET ADDRESS CITY-ST-ZIP TARLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP THE IN THIS SPACE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MARKET STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

WITEE AND EVENTOR PRINTED HAVE OF MONRO OFFICER OF DESCRICE

-28-04 (813)645-573.

FILED