

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 582979

FILED
Mar 29, 2004
Secretary of State

Entity Name: ACTIVE MECHANICAL, INC.

Current Principal Place of Business:

1801 N MILITARY TRAIL
SUITE 200
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

1801 N MILITARY TRAIL
SUITE 200
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 59-1860166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HRAWG CORP.
1801 N MILITARY TRAIL
SUITE 200
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHMIDT, SIEGFEID,
Address: P.O. BOX 301
City-St-Zip: DILDO, NF, CA A0B1P0

Title: SD () Delete
Name: SCHMIDT, HEIDI,
Address: P.O. BOX 301
City-St-Zip: DILDO, NF, CA A0B1P0

Title: TD () Delete
Name: SCHMIDT, MONICA
Address: P.O. BOX 301
City-St-Zip: DILDO, NF, CA A0B1P0

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MONICA SCHMIDT

TD

03/29/2004

Electronic Signature of Signing Officer or Director

_____ Date