2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 23, 2004 08:00 AM Secretary of State **DOCUMENT # 644467** RAYMOND E. SCHWARTZ, P.A. Principal Place of Business Mailing Address 3015 S CONGRESS AVE 3015 S CONGRESS AVE LAKEWORTH, FL 33461-9111 LAKEWORTH, FL 33461-9111 01052004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1954957 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHWARTZ, RAYMOND E DO NOT WRITE 7150 W LAKE DRIVE LAKE CLARKE SHRS, FL 33406 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. 1 am familiar with, and accept the obligations of registered agent Signature, typed or granted 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 OFFICERS AND DIRECTORS 10. TITLE SCHWARTZ, RAYMOND E HAME STREET ADDRESS 7150 W LAKE DR CITY ST - ZIP LAKE CLARKE SHRS, FL 33406 TID.E SCHWARTZ, RAYMOND E NAME STREET ADDRESS 7150 W LAKE DR CITY ST-ZIP LAKE CLARKE SHRS, FL 33406 TITLE NAME STREET ADDRESS DO NOT WRITE CITY ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE STREET ADDRESS CITY-ST ZIP

12. Thereby 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: 🚄

TITLE NAME STREET ADDRESS CITY ST 712

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR