




**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 646178</b> 1. Entity Name ADMINISTRATIVE SERVICES, INC.			
Principal Place of Business 7990 S.W. 117TH AVENUE MIAMI, FL 33183		Mailing Address ATTN: LEGAL DEPT 3501 FRONTAGE RD TAMPA, FL 33607	
<b>DO NOT WRITE IN THIS SPACE</b>			
		 01082004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 59-1953076	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			
		<b>DO NOT WRITE IN THIS SPACE</b>	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KROWSE, RODGER 5200 TOWN CENTRE CIRCLE #470 BOCA RATON, FL 33486		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BAK, JEFFREY W 3501 FRONTAGE RD TAMPA, FL 33607		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SCHULTZ, ARTHUR 3501 FRONTAGE RD TAMPA, FL 33607		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S BAK, JEFFREY 3501 FRONTAGE RD TAMPA, FL 33607		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HULSLANDER, STEVEN V 3501 FRONTAGE RD TAMPA, FL 33607		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEDER, MARC J 5200 TOWN CENTER CIRCLE #470 BOCA RATON, FL 33486		
<b>DO NOT WRITE IN THIS SPACE</b>			
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.			
SIGNATURE:  <b>Jeffrey W. BAK</b>		1/8/04 Date _____ Daytime Phone # _____	