


2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Mar 05, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 670901</b> 1. Entity Name NUANCE HANDPRINTS & CO.	
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Principal Place of Business 1831 NW 110 TERR. POMPANO BEACH, FL 33071	Mailing Address PO BOX 770068 POMPANO BEACH, FL 33077
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**DO NOT WRITE IN THIS SPACE**

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01282004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1992792	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  WILKINS, RICHARD 1831 N.W. 10TH TERRACE CORAL SPRINGS, FL 33071	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U000000077582 03/05/04-80049-004 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WILKINS, LINDA 1831 NW 110TH TERR CORAL SPRINGS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WIKINS, RICHARD 1831 NW 110TH TERR CORAL SPRINGS, FL
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**DO NOT WRITE IN THIS SPACE**

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:** *Richard Wilkins* **RICHARD WILKINS** 3/1/04 1-854-753-6803  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #