2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 686556

FILED Apr 21, 2004 Secretary of State

Current Princ	cipal Place of	f Business:	New Principal Place o	f Business:
5201 NW 34T GAINESVILLE		US		
Current Maili	ing Address:		New Mailing Address:	:
5201 NW 34T GAINESVILLE		US		
FEI Number: 59-	-2036953	FEI Number Applied For () FEI Nu	mber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
PATCH, SHAV	WN			
5201 NŴ 34T GAINESVILLE	TH ST E, FL 32605 med entity sul	omits this statement for the purpose o	of changing its registered	office or registered agent, or both,
5201 NW 34T GAINESVILLE The above nai	H ST E, FL 32605 med entity sul Florida.	omits this statement for the purpose o	of changing its registered	office or registered agent, or both,
5201 NW 34T GAINESVILLE The above nai in the State of	H ST E, FL 32605 med entity sul Florida.	omits this statement for the purpose of Signature of Registered Agent	of changing its registered	office or registered agent, or both, Date
5201 NW 34T GAINESVILLE The above nai in the State of SIGNATURE:	H ST E, FL 32605 med entity sulf Florida. Electronic		of changing its registered	
5201 NW 34T GAINESVILLE The above nai in the State of SIGNATURE:	H ST E, FL 32605 med entity sulficial in the sulficial i	Signature of Registered Agent rust Fund Contribution ().		
5201 NW 34T GAINESVILLE The above nar in the State of SIGNATURE: Election Campai OFFICERS AI Title: DI Name: BF Address: 52	TH ST E, FL 32605 med entity substitution of the section of the s	Signature of Registered Agent rust Fund Contribution (). DRS: elete	ADDITIONS/CHANGE:	Date

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: SHAWN PATCH 04/21/2004 CEO