## 2004 FOR PROFIT CORPORATION

## **ANNUAL REPORT** FILED Jul 15, 2004 08:00 AM **DOCUMENT #817975** 1. Entity Name Secretary of State BETTY JEANE INVESTMENTS, INC. Principal Place of Business Mailing Address 4210 N.E. 21ST WAY 4210 N.E. 21ST WAY LIGHTHOUSE POINT, FL 33064 LIGHTHOUSE POINT, FL 33064 07072004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 34-0921193 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARR, BETTY J DO NOT WRITE 4210 N.E. 21ST WAY LIGHTHOUSE POINT, FL 33064 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Due by September 8, 2004 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE CARR, BETTY J NAME STREET ADDRESS. 4210 N.E. 21ST WAY 07/15/04-80009-019 150.00 CITY-ST-ZIP LIGHTHOUSE PT., FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CRY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not quality 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 cath; 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:

CJTY-ST-ZIP

ME OF SIGNING OFFICER OR DIRECTOR