


22-Apr-2004 17:08

BCB Inc.

305-294-0786 Nr. 0137 S. 2/2

ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # F0000001154	
1. Entity Name TUCKER PROPERTIES INC.	

Principal Place of Business 1106 WHITE STREET KEY WEST, FL 33040 US	Mailing Address 1106 WHITE STREET ATTN: DAWN THORNBURGH KEY WEST, FL 33040
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DO NOT WRITE IN THIS SPACE

01262004 No Chg-P CR2E034 (10/03)


4. FEI NUMBER 98-0218529	Admitted For NOT APPLICABLE
5. Continuation of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**THORNBURGH, MS DAWN
1106 WHITE STREET
KEY WEST, FL 33040**

DO NOT WRITE 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 responsibility of registration agent.

SIGNATURE  **4-22-04**

Signature of agent or officer of registrant must also be on application (NOTE: Registered Agent signature required when returning)


FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$650.00

9. Election Campaign Financing: Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D LATERNSER, ANITA STADLE 28 8490 VADUZ PRINCIPALITY OF LIECHTSTEIN.
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D IPC MANAGEMENT TRUST REG. STADLE 28 8490 VADUZ PRINCIPALITY OF LIECHTSTEIN.
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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)(a), Florida Statutes. I further certify that the information indicated on this report or supplied in the registration process 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 697, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an affidavit signed by the empowe...

SIGNATURE  **4-22-04**

SIGNATURE AND TITLE OR PRINTED NAME OF SENIOR OFFICER OR DIRECTOR **Sandra Schneider** Date **4-22-04** Daytime Phone

000000130202
04/26/04-80109-008 150.00