2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006836

Entity Name: N.D.Y., INC.

FILED Apr 19, 2004 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|--|--|---|--|--|
| | NIELS PARKW 5, FL 33913 | VAY | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| | NIELS PARKV 5, FL 33913 | VAY | | | |
| FEI Number: | : 41-1500818 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | Address of (| Current Registered Agent: | Name and Address | of New Registered Agent: | |
| | OM NIELS PARKW 5, FL 33913 | /AY | | | |
| | named entity e of Florida. | submits this statement for the p | ourpose of changing its registere | ed office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Electro | nic Signature of Registered Age | ent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | C (YENISH, TOM 3910 WILLIAM FORT MYERS | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | P (YENISH, NORI 3910 WILLIAM FORT MYERS | ISON RD | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | V (YENISH, DONI 1092 WEST C SHOREVIEW, | LIFF CURVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | S (YENISH, PATT 8030 MT CURV BROOKLYN PA | 1 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | LANG, DIANE 459 THOMPSO |) Delete ON AVE W IL, MN 551183026 | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: NORB YENISH CEO 04/19/2004