

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000678

FILED
May 19, 2004
Secretary of State

Entity Name: CIPANGO LTD. CORPORATION

Current Principal Place of Business:

P.O. BOX 10300 APO
CAYMAN BUSINESS PARK # A7
CAYMAN ISLANDS, B.W.I.,

New Principal Place of Business:

P.O. BOX 10300 APO
CAYMAN BUSINESS PARK # A7
CAYMAN ISLANDS, B.W.I., CA CAYMAN

Current Mailing Address:

1800 SE 10TH AVE
400
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 98-0345445 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRASER YACHT SERVICES INC.
1800 SE 10TH AVE
400
FT. LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: ATHENIAN SECRETARIES, LTD.
Address: P.O. BOX 10300 APO, GRAND CAYMAN
City-St-Zip: CAYMAN ISLANDS, B.W.I.,

Title: CDAS () Delete
Name: SEXTON, MARLYNE
Address: 9001 N. MERIDIAN STREET
City-St-Zip: INDIANAPOLIS, IN 46260

Title: D () Delete
Name: SEXTON, ANDREA N
Address: 9001 N. MERIDIAN STREET
City-St-Zip: INDIANAPOLIS, IN 46260

Title: D () Delete
Name: SEXTON, TRACY C
Address: 9001 N. MERIDIAN STREET
City-St-Zip: INDIANAPOLIS, IN 46260

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SEXTON MARLYNE

CDAS

05/19/2004

Electronic Signature of Signing Officer or Director

_____ Date