2004 FOR PROFIT CORPORATION

## Feb 16, 2004 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # F02000001418** FELBER MOTIVATION, INC. Principal Place of Business Mailing Address 2710 DEL PRADO BLVD. 3331 SE 22ND PLACE CAPE CORAL, FL 33904 #2-178 CAPE CORAL, FL 33904 01082004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 84-1251852 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FELBER, THOMAS L 3331 SE 22ND PLACE CAPE CORAL, FL 33904 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. (NOTE Registered Agent alignature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. CPT TITLE FELBER, THOMAS L NAME U00000054546 02/16/04-80175-024 150.00 STREET ADDRESS 3331 SE 22ND PLACE CITY-ST-ZIP CAPE CORAL, FL 33905 **VCVS** TITLE NAME FELBER, LINDA 3331 SE 22ND PLACE STREET ADDRESS CMY-ST-ZIP CAPE CORAL, FL 33905 TITLE NAME STREET ADDRESS DO NOT WRITE CiTY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-\$T-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED