

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001480

Entity Name: AJS PORTRAITS, INC. VIII

FILED
Mar 31, 2004
Secretary of State

Current Principal Place of Business:

3800 US 98 HWY N.
STE 610
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

8006 HANCOCK FARM LANE
CHESTERFIELD, VA 23832

New Mailing Address:

P. O. BOX 94612
OKLAHOMA CITY, OK 73143

FEI Number: 01-0562907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCD () Delete
Name: SCIARRINO, AL
Address: 8006 HANCOCK FARM LANE
City-St-Zip: CHESTERFIELD, VA 23832

Title: S () Delete
Name: SOARES-ABRANTES, JULIANA
Address: 8006 HANCOCK FARM LANE
City-St-Zip: CHESTERFIELD, VA 23832

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: SCIARRINO, AL
Address: P. O. BOX 94612
City-St-Zip: OKLAHOMA CITY, OK 73143

Title: S (X) Change () Addition
Name: SOARES-ABRANTES, JULIANA
Address: P. O. BOX 94612
City-St-Zip: OKLAHOMA CITY, OK 73143

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: AL SCIARRINO

PCD

03/31/2004

Electronic Signature of Signing Officer or Director

Date