

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003078

FILED
Feb 05, 2004
Secretary of State

Entity Name: FIRST CLASS SEATS, INC.

Current Principal Place of Business:

310 5TH STREET
RACINE, WI 53403

New Principal Place of Business:

310 5TH STREET
SUITE 103
RACINE, WI 53403

Current Mailing Address:

310 5TH STREET
RACINE, WI 53403

New Mailing Address:

310 5TH STREET
SUITE 103
RACINE, WI 53403

FEI Number: 52-2238068

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: CPT () Delete
Name: EBERHARDT, MARK
Address: 310 5TH STREET
City-St-Zip: RACINE, WI 53403

Title: VS () Delete
Name: EBERHARDT, MARSHA
Address: 310 5TH STREET
City-St-Zip: RACINE, WI 53403

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPT (X) Change () Addition
Name: EBERHARDT, MARK
Address: 310 5TH STREET, SUITE 103
City-St-Zip: RACINE, WI 53403

Title: VS (X) Change () Addition
Name: EBERHARDT, MARSHA
Address: 310 5TH STREET, SUITE 103
City-St-Zip: RACINE, WI 53403

Title: D () Change (X) Addition
Name: EBERHARDT, MARK
Address: 310 5TH STREET, SUITE 103
City-St-Zip: RACINE, WI 53403

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: MARSHA J. EBERHARDT

VS

02/05/2004

Electronic Signature of Signing Officer or Director

Date