2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# F03000002201

Entity Name: DEBCON OF NEVADA, INC.

Current Principal Place of Business:

3180 WEST SAHARA AVE., SUITE C-13B
LAS VEGAS, NV 89102

New Principal Place of Business:

Current Mailing Address:

3180 WEST SAHARA AVE., SUITE C-13B
LAS VEGAS, NV 89102

New Mailing Address:

FEI Number: 88-0359601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PTCD ( ) Delete
Name: SMITH, C. WESLEY
Address: 3180 WEST SAHARA AVE., SUITE C-13B
City-St-Zip: LAS VEGAS, NV 89102

Title: S ( ) Delete
Name: COHEN, JAN
Address: 3180 WEST SAHARA AVE., SUITE C-13B
City-St-Zip: LAS VEGAS, NV 89102

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition
Name: SMITH, C. WESLEY
Address: 3180 WEST SAHARA AVE., SUITE C-13B
City-St-Zip: LAS VEGAS, NV 89102

Title: D ( ) Change (X) Addition
Name: SMITH, TED
Address: 3180 WEST SAHARA AVE. SUITE C-13B
City-St-Zip: LAS VEGAS, NV 89102

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: C. WESLEY SMITH PTCD 04/14/2004

Electronic Signature of Signing Officer or Director Date