## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 18, 2004 08:00 AM DOCUMENT # F03000003427 **Secretary of State** SUCCESS INC. OF TEXAS Principal Place of Business Mailing Address 7113 LONGO DR. 7113 LONGO DR. THE COLONY, TX 75056 THE COLONY, TX 75056 03142004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-2734241 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent LUBBERS, DAN DO NOT WRITE 3541 FOWLER STREET FT MYERS, FL 33901 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. 3.13.04 (NOTE, Registered Agent signature required when reinstating) DATE U00000091285 03/18/04-80003-008 150.00 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. TITLE LUBBERS, DAN NAASF STREET ADDRESS 7113 LONGO DR. THE COLONY, TX 75056 CITY-ST-ZIP TEFLE LUBBERS, JOSEPHINE NAME STREET ADDRESS 7113 LONGO DR. THE COLONY, TX 75056 CSTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST-ZP IN THIS SPACE 70% F STREET ADDRESS CITY-ST-ZIP TATLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 effective ment with an address, with all other like empowered.

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SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-04

239-275-0720

Day

**FILED**