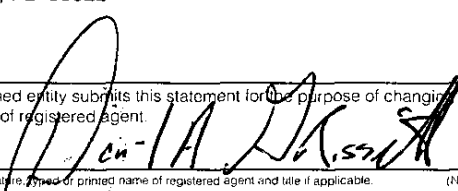
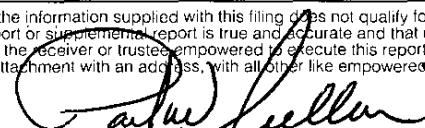


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90728 048 ***150.00

DOCUMENT # F03000003511 1. Entity Name C.I.M. INDUSTRIES, INC.																																									
Principal Place of Business 23 ELM STREET PETERBOROUGH, NH 03458			Mailing Address 23 ELM STREET PETERBOROUGH, NH 03458																																						
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																							
City & State Zip		City & State Zip		4. FEI Number 02-0420432																																					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable																																					
6. Name and Address of Current Registered Agent WALLACK, MICHAEL 1012 NW 99TH AVE. PLANTATION, FL 33322				7. Name and Address of New Registered Agent Name DAVID A GRISSETT Street Address (P.O. Box Number is Not Acceptable) 4614 KAREN LANE City JACKSONVILLE FL Zip Code 32210																																					
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  DATE 4/27/04 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																						
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P SCRIBNER, ROBERT E REID RD. FRANCESTOWN, NH</td> <td style="width:20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td>V SCRIBNER, SCOTT 6900 NELMS ST. HOUSTON, TX</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td>S SULLIVAN, PAUL 22 LOOKOUT RD. PETERBOROUGH, NH</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td>VP STEPHENS, RICHARD RTE 137 DUBLIN NH 03444</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> </table>			TITLE	P SCRIBNER, ROBERT E REID RD. FRANCESTOWN, NH	☐ Delete	TITLE	V SCRIBNER, SCOTT 6900 NELMS ST. HOUSTON, TX	☐ Delete	TITLE	S SULLIVAN, PAUL 22 LOOKOUT RD. PETERBOROUGH, NH	☐ Delete	TITLE	VP STEPHENS, RICHARD RTE 137 DUBLIN NH 03444	☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;"></td> <td style="width:20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> </table>			TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition
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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: 			Date 4/27/04 Daytime Phone 603 904-9481																																						