2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004
Secretary of State

DOCUMENT# F03000004712

Entity Name: MANTA INDUSTRIAL, INC.

Current Principal Place of Business:

5233 HOHMAN AVENUE
HAMMOND, IN 46320

New Principal Place of Business:

Current Mailing Address:

5233 HOHMAN AVENUE
HAMMOND, IN 46320

New Mailing Address:

FEI Number: 20-0006209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS INC.
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CHUPLIS, MARK
Address: 5233 HOHMAN AVENUE
City-St-Zip: HAMMOND, IN 46320

Title: V ( ) Delete
Name: DELANGE, AL
Address: 5233 HOHMAN AVENUE
City-St-Zip: HAMMOND, IN 46320

Title: S ( ) Delete
Name: BEERLING, TOM
Address: 5233 HOHMAN AVENUE
City-St-Zip: HAMMOND, IN 46320

Title: D ( ) Delete
Name: JELLINEK, JOHN
Address: 414 N. ORLEANS
City-St-Zip: CHICAGO, IL 60601

Title: TAS ( ) Delete
Name: KATZ, HOWARD
Address: 414 N. ORLEANS
City-St-Zip: CHICAGO, IL 60601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MANTA, LEO
Address: 5233 HOHMAN AVENUE
City-St-Zip: HAMMOND, IN 46320

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

Title: S (X) Change ( ) Addition
Name: JEZIORNY, JIM
Address: 5233 HOHMAN AVENUE
City-St-Zip: HAMMOND, IN 46320

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

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

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: JIM JEZIORNY S 07/08/2004

Electronic Signature of Signing Officer or Director — Date