## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F33079

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CASEY, CHRISTOPHER J

777 SO. FED. HWY. #R.P. 311

POMPANO BEACH, FL 33062

Title:

Name:

Address: City-St-Zip: FILED Jan 05, 2004 Secretary of State

DOCON	IEINI# FO	5079	Secretary of State
Entity Nar	me: DCCAS	BEY COMPANY	
Current P	rincipal Plac	e of Business:	New Principal Place of Business:
8333 W MO SUITE 205 TAMARAC		US	
Current M	lailing Addre	ss:	New Mailing Address:
	; ;, FL 33321	US	FFI Novelous Not Applicable ( )
FEI Number:	: 59-2105608	FEI Number Applied For (	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	Address of	Current Registered Agen	t: Name and Address of New Registered Agent:
CASEY, CI 777 SO FE RP503 POMPONO		33062 US	CASEY, CLINTON M 705 N.E, 3RD ST. POMPONO BEACH, FL 33060 US
	named entity e of Florida.	submits this statement for	the purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE:		01/05/2004
	Electro	nic Signature of Registered	Agent Date
Election Can	npaign Financir	ng Trust Fund Contribution ( ).	
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	CASEY, DEW	OYALE DR 1806	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	PD ( CASEY, CLIN 777 SO FED H POMPANO BO	HVVY, #503	Title: PD (X) Change ( ) Addition Name: CASEY, CLINTON M. Address: 705 N.E. 3RD ST Citv-St-Zip: POMPANO BCH., FL. 33060

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CLINTON M. CASEY P 01/05/2004

( ) Change ( ) Addition