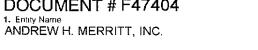
DO NOT WRITE IN THIS SPACE

AMOREW H. MERRITA

2004 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # F47404

FILED May 03, 2004 08:00 AM Secretary of State



Principal Place of Business 15436 S COUNTY ROAD 325 CROSS CREEK, FL 32640

Mailing Address

15436 S COUNTY ROAD 325 CROSS CREEK, FL 32640



04232004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2127326 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MERRITT, ANDREW H 15436 S COUNTY ROAD 325 CROSS CREEK, FL 32640

SIGNATURE:

DO NOT WRITE 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. | | | | | |
|---|--|--|--------------|---------------------------------------|---|
| SIGNATURE Signature typed or or miled name of registered agent and title 4 applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Funo Contribution State Added to Fees | | | |
| 10. | OFFICERS AND DIREC | TORS | | · · · · · · · · · · · · · · · · · · · | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | P MERRITT, ANDREW H 15436 S COUNTY ROAD 325 HAWTHORNE, FL 32640 | | | | duama unita |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP | | | | | glusjing udertæ Hássigkersk adlesæersk (15 eusig |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | DO NOT WRITE | | |
| title Name Street Address City-St-Zip | | | | N. | THIS SPACE |
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| NAME STREET ADDRESS CITY+ST+ZIP | | | | | |
| 12. Thereby certify that the information supplied with this filling 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. | | | | | |