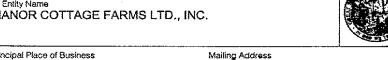
2004 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # F47426 * * * 1. Entity Name MANOR COTTAGE FARMS LTD., INC. Principal Place of Business Mailing Address 2213 E ATLANTIC BLVD 2213 E ATLANTIC BLVD

FILED Apr 22, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

SUITE C

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

POMPANO BEACH, FL 33062-5209

No Chg-P 01132004

CR2E034 (10/03) Applied For

4. FEI Number NOT APPLICABLE 5. Certificate of Status Desired

3.26.04

Not Applicable \$8.75 Additional Fee Required

2082

5. Name and Address of Current Registered Agent

DUNNING, ROGER **EZ ACCOUNTING** 2213 EAST ATLANTIC BLVD

SIGNATURE:

POMPANO BEACH, FL 33062-5209

SUITE C

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IN .	THIS	SPAC	E

POWPANC) bçACH, FL 33062-5209			** *	THO OF ACE		
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 printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating).							
	E NOWIII FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000124781 04/22/04-80058-011 158.75		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP DUNNING, ROGER 2213 E ATLANTIC BLVD POMPANO BEACH, FL 33062	TORS					
name Street address City-SI-ZIP	D DUNNING, URSULA 2213 E ATLANTIC BLVD POMPANO BEACH, FL 33062						
TITLE NAME STREET ADORESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CRY-ST-ZIP							
TITLE NAME STREET ADDRESS CRY-ST-ZIP							
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.							