

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F89397

Entity Name: EDIBLES ETC., INC.

FILED
Feb 02, 2004
Secretary of State

Current Principal Place of Business:

285 W CENTRAL PKWY
SUITE 1724
ALTAMONTE SPRINGS, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

285 W CENTRAL PKWY
SUITE 1724
ALTAMONTE SPRINGS, FL 32751 US

New Mailing Address:

FEI Number: 59-2200617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIBBEN, SHARON
285 W CENTRAL PARKWAY
SUITE 1724
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

NINA, SHARON
285 W CENTRAL PARKWAY
SUITE 1724
ALTAMONTE SPRINGS, FL 32714 US

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: SHARON NINA

02/02/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GRIBBEN, SHARON
Address: 419 WEST CITRUS AVE
City-St-Zip: ALTAMONTE SPGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NINA, SHARON
Address: 419 WEST CITRUS AVE
City-St-Zip: ALTAMONTE SPGS, FL 32714

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: SHARON NINA

PRES

02/02/2004

Electronic Signature of Signing Officer or Director

Date