

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002364

FILED
Apr 12, 2004
Secretary of State

Entity Name: RAYDEN ASSOCIATES LIMITED (INCORPORATED COMPANY)

Current Principal Place of Business:

PO BOX 24, BEAULLEU MILL LANE
SARK,
CHANNEL ISLANDS GY9 OSA UK,

Current Mailing Address:

PO BOX 24, BEAULLEU MILL LANE
SARK,
CHANNEL ISLANDS GY9 OSA UK,

New Principal Place of Business:

LOUIS BUILDING 6 GOLDIE TERRACE
2ND FLOOR
ISLE OF MAN, UK IM1 1EB UK

New Mailing Address:

LOUIS BUILDING 6 GOLDIE TERRACE
2ND FLOOR
ISLE OF MAN, UK IM1 1EB UK

FEI Number: 98-0195485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRD, GINA
3355 W. VINE
STE 102
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

BYRD, GINA
3355 W. VINE ST.
STE 102
KISSIMMEE, FL 34741 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: GINA BYRD

04/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: WRIGHT, DAVID J
Address: BEAULLEU MILL LANE SARK
City-St-Zip: CHANNEL ISLANDS GY9 OSA U K,

Title: D () Delete
Name: WRIGHT, INGEBORG
Address: BEAULLEU MILL LANE SARK
City-St-Zip: CHANNEL ISLANDS GY9 OSA U K,

Title: DAS () Delete
Name: CRANE, STUART G
Address: THE MILLRACE, SULBY, RAMSEY
City-St-Zip: I O M IM7 ZHT UK,

Title: D () Delete
Name: DIAS, JENNIFER D
Address: 12 THE MILLRACE, SULBY, RAMSEY
City-St-Zip: I O M IM7 ZHT UK,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: WRIGHT, DAVID J
Address: 2ND FLOOR LOUIS BUILDING 6 GOLDIE TERRACE
City-St-Zip: ISLE OF MAN, UK IM1 1EB UK

Title: D (X) Change () Addition
Name: WRIGHT, INGEBORG
Address: 2ND FLOOR LOUIS BUILDING 6 GOLDIE TERRACE
City-St-Zip: ISLE OF MAN, UK IM1 1EB UK

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: DAVID WRIGHT

DS

04/12/2004

Electronic Signature of Signing Officer or Director

Date