2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED May 05, 2004 08:00 AM Secretary of State

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Entity Name

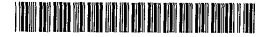
HENRY FISCHER & SONS, INC.



Principal Place of Business

10725 U.S. NO. 1 POST OFFICE BOX 68 SEBASTIAN, FL 32958 Mailing Address

POST OFFICE BOX 68 SEBASTIAN, FL 32978-0068



04292004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2301958

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'HAIRE, MICHAEL 3111 CARDINAL DRIVE VERO BEACH, FL 32963

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8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or a	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signalure, typed or printed name of registered agent and title	if applicable (NOTE Registered	Agent signature	required when rainstating)	DATE
	E NOW!!! FEE IS \$150.00 ny 1, 2004 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			tignang (56726 US/05/04-90087-905 150,00
10	OFFICERS AND DIREC	CTORS			
TITLE	PD				
NAME	FISCHER, HENRY A.	l l			
STREET ADDRESS	10725 US HWY. 1				
CITY-ST-ZIP	SEBASTIAN, FL				
TITLE	ST				
NAME	FISCHER, HENRY A.				
STREET ADDRESS	10725 US HWY. 1				
CITY-ST-ZIP	SEBASTIAN, FL				
TITLE	D				
NAME	FISCHER, BETSY				
Street address	POST OFFICE BOX 780068	i		no	NOT WOITE
CITY-ST-ZIP	SEBASTIAN, FL 329780068			טע	NOT WRITE
TITLE	D			IM '	THIS SPACE
NAME	FISCHER, ERIC C			11.4	IIIIS SPACE
STREET ADDRESS	10729 US #1	İ	ı		
CITY-S1-ZIP	SEBASTIAN, FL 32958				
TITLE	D				
NAME	FISCHER, CARL A				
STREET ADDRESS	10729 US #1				
CITY+ST-ZIP	SEBASTIAN, FL 32958				
TITLE					
NAME					
STREET ADDRESS					

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.

SIGNATURE:

CITY-ST-21P

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

A. FISCHE

4/28/04

112-589-8082

Daytime Phone