2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

3.19

Apr 21, 2004 8:00 am Secretary of State 00000 G87042 1. Entity Name 04-21-2004 90035 043 ***150.00 PAYNE CORPORATION Principal Place of Business Mailing Address 780 DELTONA BLVD PO BOX 4028 74000000 STE 105 ENTERPRISE, FL 32725 DELTONA, FL 32725 2. Principal Place of Business 3. Mailing Address 243 RIVER VILLAGE DR. Suite, Apt. #, etc. "Suite, Apt. #, etc. 04162004 Applied For City & State City & State 4. FEI Number Debary FLORIDA 59-2617314 Not Applicable Zip 32713 Zìp Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERNANDEZ, LUIS A., JR. Street Address (P.O. Box Number is No Acceptable) 780 DECTONA BLVO. 750 DELTONA BLVD STE 105 DELTONA, FL 32725 DECTONA 8. The above named entity 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 ubmits the obligations of regis SIGNATURE Signature, typed or printed istered agent and title if applicable (NOTE: Registered Agent signatu 9. Election Campaign Financing \$5.00 0 0020 00 FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 000000000000 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PΠ TITLE ☐ Delete TITLE ☐ Change ■ Addition HERNANDEZ, LUIS A., JR. NAME NAME 780 DELTONA BLVD STE 105 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELTONA, FL 32725 CITY-ST-ZIP VD TITLE ☐ Delete TITLE Change ■ Addition NAME HARDY, TRACY E. NAME STREET ADDRESS 780 DELTONA BLVD STE 105 STREET ADDRESS CITY-ST-7/P DELTONA, FL 32725 CITY-ST-ZIP ☐ Delete TITLE THE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition MAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CSTY-ST-ZIP CITY-ST-ZIP MLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-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 supplied entail upports 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 trustife impowered 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 SIGNATURE:

FILED