2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 03, 2004 08:00 AM Secretary of State

(813)646-2203 Dayline Plore #

Fab. 27, 2004

Principal Place of Business Mailing Address	
4425 MOUNTAIN VIEW DRIVE 4425 MOUNTAIN VIEW DRIVE LAKELAND, FL 33813 LAKELAND, FL 33813	
	Applied For Not Applicable
BRYANT, ALEX C. 4425 MOUNTAIN VIEW DRIVE LAKELAND, FL 33803 IN THIS SPACE	
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 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) DATE UNUTURE 15.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees	
10. OFFICERS AND DIRECTORS INTLE DP NAME BRYANT, ALEX C. SIRELI ADDRESS 4425 MOUNTAIN VIEW DRIVE LAKELAND, FL THEE NAME SIRELI ADDRESS GIY-SI-ZIP	
TITLE RAVE STREET ADDRESS CITY- ST-ZIP DO NOT WRITE IN THIS SPACE STREET ADDRESS USTY- ST-ZIP	
IFIE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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 cath; that I am an office 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?	er or director

ALLY C. ON THE DESIGNING OFFICER OR DIRECTOR

SIGNATURE: