## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 30, 2004 8:00 am Secretary of State **DOCUMENT # H36794** 04-30-2004 90234 026 \*\*\*150.00 1. Entity Name NORDIC PROPERTIES, INC. Principal Place of Business Mailing Address 74074673 BOX 4367 LAKE WORTH, FL 33460 LANTANA, FL 33462 US 1517 NO. L Street CR2E034 (10/03) 04222004 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2478500 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent ANTILA, MARTTI DO NOT WRITE 1517 NORTH L STREET LAKE WORTH, FL 33460 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE MAIJA L. ANTILA NAME 4590 DAVIS ROAD STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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), Fiorida 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 attackment with an address, with all other like impowered.

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