## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 28, 2004 08:00 AM Secretary of State

ANNUAL REPURI				Secretary of State
DOCU 1. Entity Nam R.E.T., IN		_		Secretary of State
Principal Plac % REUBEN E 6260 48TH I NAPLES, FL	E. THOMPSON, JR. AVE N.W.	Mailing Address % REUBEN E. THOMPSON, IR. 6017 PINE RIDGE - PMB 168 NAPLES, FL 34119		
D	O NOT WRITE		CE	05182004 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For 59-2659426 Not Applied For Not Applicable  5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent THOMPSON, REUBEN E., JR. 6260 48TH AVE N.W. NAPLES, FL 34119				DO NOT WRITE 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 lamiliar with, and accept the obligations of registered agent.  Signature. Typed or printed name of registered agent and the if applicable  INDIE Registered Agent signature required when refrestating)  DATE.				
FILE NOWIL! FEE IS \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10. TITLE MAME STREET ADDRESS CITY-ST ZIP	OFFICERS AND I P THOMPSON, REUBEN E., JR. 6260 18TH AVE N.W. NAPLES, FL 34119 DST	DIRECTORS		U00000161744 05/28/04-80002-022 150.00
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	THOMPSON, RUEBËN E JR 6260 18TH AVE N NAPLES, FL 34119			DO NOT WRITE
CITY-ST-ZIP  NAME  STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE				

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 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 receiver or trustee empowered to execute this report as required by Chapter 807, 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: Signature and types on printed have of Signature of Dispersion of Signature and types on printed have of Signature and types on printed have of Signature and types of printed have of Signature and types of printed have on pine to the signature of Signature and types of printed have of Signature and types of the signature and types o

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