2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2004
Secretary of State

DOCUMENT# J63632

Entity Name: ETLOMA INC.

Current Principal Place of Business:

3044 S MILITARY TRAIL
SUITE A
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

3044 S MILITARY TRAIL
SUITE A
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 59-2814736 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ETTMAN, JON
1823 ANTIGUA RD
LAKE SHORES, FL 33406

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	ETTMAN, JON,	
Address:	1823 ANTIGUA RD	
City-St-Zip:	LAKECLARKE SHORES, FL	
Title:	V	( ) Delete
Name:	LONDONO, FRANCISCO,	
Address:	2963 BOLTON CT	
City-St-Zip:	W PALM BCH, FL	
Title:	T	( ) Delete
Name:	ETTMAN, LAURA,	
Address:	1823 ANTIGUA RD.	
City-St-Zip:	LAKECLARKE SHORES, FL	
Title:	S	( ) Delete
Name:	MAYO, CLEMENTE,	
Address:	2579 WESTEND RD	
City-St-Zip:	W PALM BCH, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRA NCIS 07/06/2004

Electronic Signature of Signing Officer or Director — Date