2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State
04-19-2004 90371 021 ***150.00

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DOCUMENT # J99816

1. Entity Name
RADON CHECK, INC.

Principal Place of Business	Mailing Address
1019 UNION STREET CLEARWATER, FL 33755 US	35246 U.S. 19 NORTH SUITE 221 PALM HARBOR, FL 34684 US

2. Principal Place of Business		3. Mailing Address	
5742 FLORIDA AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc. #221	
City & State NEW PORT RICHEY		City & State	
Zip 34652	Country PASCO	Zip	Country

04142004 Chg-P CR2E034 (10/03)

4. FEI Number 59-2923194 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BOOTH, SANDRA E 1019 UNION STREET CLEARWATER, FL 33755	Name BOOTH, SANDRA E. Street Address (P.O. Box Number is Not Acceptable) 5525 BAMBOO LANE City NEW PORT RICHEY FL Zip Code 34652

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, and accept the obligations of registered agent.

SIGNATURE Sandra Booth, President 4/13/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOOTH, SANDRA E 1019 UNION STREET CLEARWATER, FL 33755	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 5525 BAMBOO LANE NEW PORT RICHEY, FL 34652
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 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 attachment with an address, with all other like empowered.

SIGNATURE: Sandra Booth, Pres. 4/13/04 727.445.9777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #