## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Apr 05, 2004 08:00 AM Secretary of State

DOCUMENT # K34833  1. Entity Name AMUSEMENT CANVASS OUTFITTERS, INC.						- Coury	or State
Principal Plac 3723 NEBRA TAMPA, FL	ASKA 3723	Address NEBRASKA A, FL 33603-5013 US		t tempetit was fitti	2000 terku terku terku (117 B)	Mid Widnik wswel Wiwee Midde	i ministrat it tääti
DO NOT WRITE IN THIS SPACE				02222004 No Chg-P CR2E034 (10/03)  4. FEI Number			
BECKETT, LYNNE 1726 WEST HUMPHREY TAMPA, FL 33604			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 familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and site 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.				00 May Be ed to Fees	Hoggo	00524	
TITLE HAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECTOR  D BECKETT, LYNNE 1726 WEST HUMPHREY TAMPA, FL	S			04/05/04-6	30021-011	150.00
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12. I hereby a indicated of the corchanged	certify that the information supplied with this filing of on this report or supplemental report at use and a poration or the received or tipuste sympowered to a or on an attachment with arrestdates, with all other	loes not qualify for the exen ocurate and that my signati xecute this report as require r like empowered.	nption stated in Se ure shall have the r ed by Chapter 607	ction 119.07(3)(i), F same legal effect as , Florida Statutes; a	lorida Statutes. I fu if made under oal and that my name a	orther certify that the certify that I am an off appears in Block 1	ne information cer or director 0 or Block 11 if