## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 19, 2004 08:00 AM Secretary of State

ANNOAE REPORT					Secretary of State			
1. Entity Nam	MENT # K47376			Sec	retary o	T State		
· ·	o of Business NISH RIVER BLVD V, FL 33431 US	Mailing Address 500 NE SPANISH RIVER BLVD STE 12 BOCA RATON, FL 33431 U	\$	: 				
ם	OO NOT WRITE	02062004 No Chg-P CR2E034 (10/03)  4. FEI Number 65-0085309   Applied For Not Applicable    5. Certificate of Status Desired   \$8.75 Additional Fee Required						
	6. Name and Address of Current Re	gistered Agent			AND THE PERSON OF THE PERSON O	. 6614		
500 NE SF STE 12	DONALD J. PANISH RIVER BLVD JDERDALE, FL. 33308	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 acceptable obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE Registered Agent signature required when reinstating)  DATE							with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution				00 May Be 02/19/04-80070-013 158.75				
10.	OFFICERS AND DIF	RECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLINTON, DONALD J. 500 NE SPANISH RIVER BLVD., S' BOCA RATON, FL 33431	TE. 12						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			dimension.		in the second se	<u>anna a sing in la</u>	A APPROXIMATION AND A SECOND	
TITLE NAME STREET ADDRESS CITY-SI-ZIP			DO NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE						
TITLE NAME STREET ADDRESS								

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.

DONALD J. Clinton

SIGNATURE: X

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

2/16/04 561-391-6100