2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 12, 2004 08:00 AM Secretary of State **DOCUMENT # K78996** WATHEN ACCOUNTING, INC. Principal Place of Business Mailing Address 11804 N. 56TH STREET 11804 N. 56TH STREET TAMPA, FL 33617 TAMPA, FL 33617 01142004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2942326 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WATHEN MARTIN A DO NOT WRITE 11804 N. 56TH STREET TAMPA, FL 33617 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, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DPST WATHEN, MARTIN A. NAME STREET ADDRESS 27507 ZUME CT. CITY-ST-ZIP WESLEY CHAPEL, FL 33543 //00000048194 //2/12/04-80070-018 150.00 Titt F STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CRY-ST-ZIP NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME

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 of 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.

STREET ADDRESS CITY-ST-ZIP

> martin SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR