

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L45740

FILED
May 28, 2004
Secretary of State

Entity Name: FEDERATED FIBRES, INC.

Current Principal Place of Business:

1801 SW 68 AVE
PLANTATION, FL 33324

New Principal Place of Business:

1801 SW 68 AVE
PLANTATION, FL 33317

Current Mailing Address:

1801 SW 68 AVE
PLANTATION, FL 33324

New Mailing Address:

1801 SW 68 AVE
PLANTATION, FL 33317

FEI Number: 65-0174194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAREY, MARY ELLEN
1801 SW 68TH AVENUE
PLANTATION, FL 33317 US

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: PD () Delete
Name: CAREY, CLEMENT,
Address: 1801 SW 68TH AVE
City-St-Zip: PLANTATION, FL 33317

Title: VST () Delete
Name: CAREY, MARY ELLEN,
Address: 1801 SW 68TH AVE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: CAREY, MARY ELLEN,
Address: 1801 SW 68TH AVE
City-St-Zip: PLANTATION, FL 33317

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:

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: CLEMENT CAREY

PRES

05/28/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date