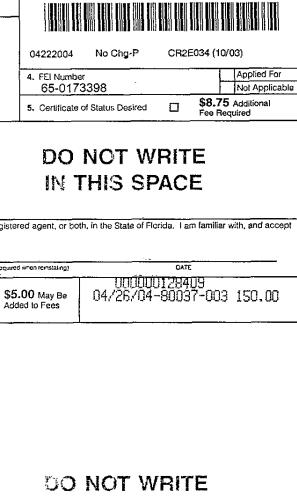
## 2004 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # L50536 1. Entity Name GARY DAVID BRADY, P.A. Principal Place of Business Mailing Address P.O. BOX 23117 2455 EAST SUNRISE BLVD FT. LAUDERDALE, FL 33307-3117 US 301 FT LAUDERDALE, FL 33304

## FILED Apr 26, 2004 08:00 AM **Secretary of State**



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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 little if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution 10. OFFICERS AND DIRECTORS DP TITLE BRADY, GARY DAVID NAME STREET ADDRESS 1036 NE 9TH AVENUE FT. LAUDERDALE, FL CITY-ST-ZIP FITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IN THIS SPACE HITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP

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 Statules. 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:

BRADY, GARY DAVID 1036 NE 9TH AVE.

FT. LAUDERDALE, FL 33304