

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M41574

Entity Name: I.D.B., INC.

FILED  
Apr 18, 2004  
Secretary of State

## Current Principal Place of Business:

C/O GRAPHICS INK  
1550 W. 84TH ST., STE. 21  
HIALEAH, FL 33014 US

## New Principal Place of Business:

## Current Mailing Address:

C/O GRAPHICS INK  
1550 W. 84TH ST., STE. 21  
HIALEAH, FL 33014 US

## New Mailing Address:

FEI Number: 59-2833703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BYRNES, DAVID J.  
1550 WEST 84TH ST.  
STE. 21  
HIALEAH, FL 33014 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BYRNES, DAVID J.,  
Address: 9558 SW 59 ST.  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: BYRNES, I. MARGOT,  
Address: 9558 SW 59 ST.  
City-St-Zip: MIAMI, FL

Title: T (X) Delete  
Name: BYRNES, SCOTT D  
Address: 2970 SKYVIEW DR LOT 182  
City-St-Zip: LITHIA SPRGS, GA

Title: S (X) Delete  
Name: KINSEY, TAMMY BYRNES  
Address: 2805 WOODLAND HILLS DRIVE  
City-St-Zip: CUMMING, GE

Title: V (X) Delete  
Name: BYRNES, JOHN G  
Address: 4015 WINDTREE DR  
City-St-Zip: TAMPA, FL 33674

Title: V (X) Delete  
Name: BYRNES, KEVIN P  
Address: 360 24TH ST NW APT 361  
City-St-Zip: WINTER HAVEN, FL

## 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:

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: DAVID J BYRNES

PRES

04/18/2004

Electronic Signature of Signing Officer or Director

Date