2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000912

City-St-Zip:

Entity Name: FRIZMAR RESOURCES CORPORATION

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
52 W OAKLAND PARK BLVD STE 169 FT LAUDERDALE, FL 333112520					52 W OAKLAND PARK BLVD STE 169 FT LAUDERDALE, FL 333112520			
Current Mailing Address:					New Mailing Address:			
52 W OAKLAND PARK BLVD STE 169 FT LAUDERDALE, FL 333112520					52 W OAKLAND PARK BLVD STE 169 FT LAUDERDALE, FL 333112520			
FEI Number:	: 86-1050762	FEI Nui	mber Applied For()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
2255 WILT	IS, DEAN J TON DRIVE MANORS, FL 3	3305	US					
	named entity s e of Florida.	ubmits t	his statement for the pu	ırpose o	f changing it	ts registere	ed office or registered agent, or both,	
SIGNATUR	RE:							
	Electron	ic Signa	ture of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	D () TISON, MARK A 141 NE 55 STRI FT LAUDERDAL	EET	334		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SHERER, FRED 52 W OAKLAND FT LAUDERDAL	PARK BI			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () KESLER, WILLI 4101 NE 13 AVE FT LAUDERDAL	Ξ	309		Title: Name: Address: City-St-Zip:	D KESTER, V 4101 NE 13 FT LAUDER		
Title: Name: Address: City-St-Zip:	D () GAUNTT, MILES 3140 NE 23 AVE LIGHTHOUSE P	Ξ	33064		Title: Name: Address: City-St-Zip:	D MADISON, 1200 NE 17 FT LAUDER		
Title: Name: Address:	()	Delete			Title: Name: Address:	D SIMPSON, 1616 21 ST	() Change (X) Addition LORI r. S. LOT133	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: ST PETERSBURG, FL 33712

SIGNATURE: MARK A TISON D 04/14/2004