

ANNUAL REPORT

DOCUMENT # N99000005393

1. Entity Name
THE REACH PROJECT, INC.



FILED
Apr 29, 2004 08:00 AM
Secretary of State

Principal Place of Business
**9700 S.W. 57TH STREET
COOPER CITY, FL 33328**

Mailing Address
**9700 S.W. 57TH STREET
COOPER CITY, FL 33328**



04242004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0954658	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PIRYLIS, PAULA
9700 S.W. 57TH STREET
COOPER CITY, FL 33328**

**DO NOT WRITE
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: *Paula S Piryliis* DATE: 4/26/04
Signature, typed or printed name of registered agent applicable if applicable (NOTE Registered Agent signature required when re-registering)

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GALVEZ, ANGELA 9702 SW 57TH STREET COOPER CITY, FL 33328
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SUSSMAN, ELLEN 12740 COUNTRYSIDE TERRACE COOPER CITY, FL 33330
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PIRYLIS, PAULA T 9700 S.W. 57TH STREET COOPER CITY, FL 33328
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PETERSON, JOHN 8522 NW 21 ST CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PITCHER, HELEN 2804 S EDGEHILL LN COOPER CITY, FL 33026
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST KILFOIL, KAREN 5814 SW 112 CT COOPER CITY, FL

N990000141223
04/29/04-R0001-012 61.25

**DO NOT WRITE
IN THIS SPACE**

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 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 617, 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: *Paula S Piryliis* DATE: 4/26/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #