2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N99000006464

Entity Name: SOURCE INNOVA CONCEPTS INTERNATIONAL, INC.

Current Principal Place of Business:

2114 NW 55TH BLVD. #23
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

2114 NW 55TH BLVD. #23
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 59-3617902 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SILAS, NANCY S
2114 NW 55TH BLVD. #23
GAINESVILLE, FL 32653 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SILAS, NANCY S
Address: 904-A SW 62ND TERRACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: DAVIS, PATRICIA
Address: 3018 NE 10TH STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: D ( ) Delete
Name: GILMORE, KENNETH DR.
Address: 812 SE 10TH TERRACE
City-St-Zip: GAINESVILLE, FL 32641

Title: D ( ) Delete
Name: LONG, DOROTHY
Address: 1124 SE 19TH TERRACE
City-St-Zip: GAINESVILLE, FL 32641

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D. ( ) Change (X) Addition
Name: JACKSON, CAROLYN
Address: 2708 NW 170TH STREET
City-St-Zip: NEWBERRY, FL 32669

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.

SIGNATURE: NANCY S. SILAS P 04/30/2004

Electronic Signature of Signing Officer or Director — Date