2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 01, 2004 08:00 AM Secretary of State

ANNUAL REPORT					; - : :	Mar 01, 2004 (8:00
DOCUMENT # P0000000372 1. Entity Name FEMI INTERNATIONAL, INC.						Secretary of Sta
LEMI HAI	ERIVATIONAL, INC.		age of the control of			_
Principal Place of Business 211 E. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32118 Mailing Address 211 E. INTERNATIONAL SPEEDW DAYTONA BEACH, FL 32118				WAY BLVD.		
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E	O NOT WR	ITE II	N THIS SPA	CE	02112004 4, FEI Numb	No Chg-P CR2E034 (10/03) Det Applied For
					59-361	
	6. Name and Address of C	urrent Regis	tered Agent			
AMON, URSULA 211 E. INTERNATIONAL SPEEDWAY BLVD. #213 DAYTONA BEACH, FL 32118				DO NOT WRITE IN THIS SPACE		
D Thombore	samed entity submits this state	mont for the	wante of shapping to register	ad affice or register	od scopt or bo	with in the Chate of Clarida . Less familiar with and negat
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 Signature, types or printed name of registered agent and title if applicable (NOTE, Registered Agent adjusted when reinstating) OATE						
FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.					00 May Be od to Fees	U00000073179 03/02/04-80026-003 150.00
10.		S AND DIREC	CTORS			
TITLE Name	AMON, FELIX					
STREET ADDRESS	1					
City-st-zip	DAYTONA BEACH, FL 32	118	.ac#41, 4			
TITLE NAME	TS AMON, URSULA					
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CITY-ST-ZIP	DAYTONA BEACH, FL 32118					
TITLE						
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12. I hereby of indicated	certify that the information suppli on this report or supplemental r	ied with this fi eport is true a	ling does not qualify for the exer and accurate and that my slonat	mption stated in Secure shall have the s	ction 119.07(3) ame legal effe	(i), Florida Statules. I further certify that the information of as if made under oath; that I am an officer or director
of the corporation of 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.						

2125/04

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _