

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007580

Entity Name: INSPECTION DEPOT, INC.

FILED  
Apr 29, 2004  
Secretary of State

**Current Principal Place of Business:**

7700 SQUARE LAKE BLVD  
UNIT 2  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

7700 SQUARE LAKE 3000  
JACKSONVILLE, FL 32223

**New Mailing Address:**

FEI Number: 59-3628497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROWAN, MICHAEL M  
11150 2C SAN JOSE BLVD  
JACKSONVILLE, FL 32223

**Name and Address of New Registered Agent:**

ROWAN, MICHAEL M  
7700 - 2 SQUARE LAKE BLVD.  
JACKSONVILLE, FL 32256

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: MICHAEL M. ROWAN

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: ROWAN, MICHAEL  
Address: 11150-2C SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32223

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: ROWAN, MICHAEL  
Address: 7700 - 2 SQUARE LAKE BLVD.  
City-St-Zip: JACKSONVILLE, FL 32256

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: MICHAEL M ROWAN

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date