

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P00000009285

1. Entity Name  
ON THE WAY COMPUTERS, INC.



Principal Place of Business  
2497 HERON TERR  
#C102  
CLEARWATER, FL 33762

Mailing Address  
2497 HERON TERR  
#C102  
CLEARWATER, FL 33762

**FILED  
Jan 20, 2004 08:00 AM  
Secretary of State**



**DO NOT WRITE IN THIS SPACE**

01122004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3621792	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

BROOK, JON-MICHAEL C  
2497 HERON TERR  
#C102  
CLEARWATER, FL 33762

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$350.00**

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

10. OFFICERS AND DIRECTORS

TITLE D  
NAME BROOK, JON-MICHAEL C  
STREET ADDRESS 2497 HERON TERRACE #C102  
CITY-ST-ZIP CLEARWATER, FL 33762

U000000008178  
01/20/04-80053-019 150.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 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.

SIGNATURE:

Jon-Michael C. Brook

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/04

Date

727.644.7189

Daytime Phone #