2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 06, 2004 8:00 am Secretary of State

106 CASH DR. SEFFNER, FL 33584 2. Principal Place of Business Sulfe, Apt. 4, etc. 3. Mailing Address Sulfe, Apt. 4, etc. 3. Sulfe, Apt. 4, etc. 3. Mailing Address Sulfe, Apt. 4, etc. 3. Sulfe, Apt. 4, etc. 3. Mailing Address Sulfe, Apt. 4, etc. 3. Sulfe, Apt. 4, etc. 3. Mailing Address Sulfe, Apt. 4, etc. 3. Sulfe, Apt. 4, etc. 4. FEI Number 65-1012499 5. Certificate of Status Desired 65-1012499 5. Replied For 65-1012499 6. Replied For 65-101249	L Entity Name	CUMENT # P0000015834			05-06-2004 90170 045 ***150.00	
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12. Thereby 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	12. I haraby partifu that the interrection symplic	ad with this filling does not qualify for	r the exemption stated in	Section 119 07(3)(i) Florida Statutos Life	ther 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 changed, or on an attachment with an address with all other like empowered.	indicated on this report or supplemental re of the corporation or the receiver or trusted	eport is true and accurate and that no e empowered to execute this report	ny signature shall have th as required by Chapter 6	e same legal effect as if made under oath 07, Florida Statutes; and that my name ar	r that I am an officer or director.	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ROCKEY 4/29/04 813 9869302	SIGNATURE: 1/5 4 /	<u> </u>	TI NI. K	EREY 4/27/04 8	139869302	