


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb. 02, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000060831 1. Entity Name GERRY BRISCO, INC.	
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Principal Place of Business 4315 N. HUBERT AVENUE TAMPA, FL 33614	Mailing Address 1310 W. BUSCH BLVD. TAMPA, FL 33612
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01052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3661235	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent BRISCO, GERALD 4315 N. HUBERT AVENUE TAMPA, FL 33614

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

000000031414
02/04/04-80147-025 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVD BRISCO, GERALD 4315 N. HUBERT AVENUE TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD BRISCO, BARBARA ANN 4315 N. HUBERT AVENUE TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE 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)(j), 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: *Gerald Brisco* 1.30.04 813.920.5924
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone If