## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2004 08:00 AM Secretary of State

	ANTIOALI	Et OIX!	· · · · · · · · · · · · · · · · · · ·	Secretary of State
1. Entity Nam	MENT # P0000007031 DEF SAN MARCO, INC.	3		
Principal Plac	e of Business M	ailing Address		
4 ROHDE AV	ľĘ "	FROHDE AVE		
ST AUGUSTIN		ST AUGUSTINE, FL 32084		
C	O NOT WRITE II	×	04102004 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For 59-3662121 Not Applied For Not Applicab  5. Certificate of Status Desired S8.75 Additional Fee Required	
		, , ,	1	
MOON, JAYNE 4 ROHDE AVE ST AUGUSTINE, FL 32084			Andrew Andrews Control of the Contro	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 \$550.00  9. Election Campaign Finar Trust Fund Contribution.				.00 May Be U00000138177 04/29/04-80071-002 150.00
10.	OFFICERS AND DIREC	CTORS	4	
TALE	PVST		1	
NAME	MOON, JAYNE		[	
STREET ADDRESS	4 ROHDE AVE		1	
CITY-ST-ZIP	ST AUGUSTINE, FL 32084	<u></u>	1	
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NAME	MOON, JAYNE			
STREET ADDRESS	4 ROHDE AVE		1	
CITY-ST-ZIP	ST AUGUSTINE, FL 32084		j	
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City-SI-ZIP			l	
	certify that the information supplied with this #	ling does not qualify for the	montion etated in Co	option 110 07/21/0 Florida Cababas (Gustas and Casabas
12. I hereby certify that the information supplied with this filling 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.				

4/21

AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: