## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 25, 2004 08:00 AM Secretary of State

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DOCUMENT # P00000074285			v
1. Entity Name			
THE CORNER PUB, INC.			
	THE PARTY OF THE P		
Principal Place of Business Mailing Address			
1915 N ANDREWS AVE 1101 NW 30TH STREET			
WILTON MANORS, FL 33311 3	_		
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DO NOT WRITE IN THIS SPA	\^E	02132004 No Chg-P CR2	E034 (10/03)
DO NOT WHITE IN THIS SPA	4CE	4. FEI Number	Applied For
		65-1030442	Not Applicable
		5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			ree nadadeo
	<u></u>		
PYE, THOMAS G	1	DO NOT WRIT	<b>"=</b>
408 W. UNIVERSITY AVE.		DO NOT WITH	in the second se
SUITE 108-B GAINESVILLE, FL 32601		IN THIS SPAC	F
G (((E54)EEE, ( E 0200 )		0.7.0	****
			TANKS MARKET AND STORE
8. The above named entity submits this statement for the purpose of changing its regis	tered office or registe	d agent, or both, in the State of Florida. I a	m familiar with, and accept
the obligations of registered agent.			,
			~ '// 1
SIGNATURE MORE STORY	· Salument »	2/1	3104
SIGNATURE Squatoffe, typed or printed name of registered agent and title if applicable (NOTE; Registered agent and title if applicable)	tored Agent aignature recuker	men reinstating)	3/69
Sanatofe, typed or printed name of registered agent and title if applicable (NOTE: Asgis		11000000040	6769 00
Suffature, typed or printed name of registered agent and title if applicable (NOTE; Regis  FILE NOW!!! FEE IS \$150,00  9. Election Campaign Fit	nancing \$5	10 May Be 1000000546	
FILE NOW!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  Strate, typed or printed name of registered apergend title it applicable  9. Election Campaign Fit Trust Fund Contribution	nancing \$5	10 May Be 1000000546	
FILE NOWILI FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  OFFICERS AND DIRECTORS  (NOTE: Registered agents for title if applicable (NOTE: Registered agents for the properties) and the properties of the	nancing \$5	10 May Be 1000000546	
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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: