

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P00000075525

1. Entity Name  
E Z DROP-N PRODUCTS, INC.



Principal Place of Business  
3458 WINDY HILL PLACE  
JACKSONVILLE, FL 32246

Mailing Address  
3458 WINDY HILL PLACE  
JACKSONVILLE, FL 32246



04092004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3663216

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

SLEAP, TODD  
3458 WINDY HILL PLACE  
JACKSONVILLE, FL 32246

**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 Financing  
Trust Fund Contribution ☐

**\$5.00 May Be**  
**Added to Fees**

1000000123681  
04/22/04-80013-021 150.00

**10. OFFICERS AND DIRECTORS**

FILE  
NAME  
P  
SLEAP, TODD  
STREET ADDRESS  
3458 WINDY HILL PLACE  
CITY, ST, ZIP  
JACKSONVILLE, FL 32246

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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)(f), 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: *Todd E. Sleaf* Todd E. Sleaf

Date *4-20-04* Daytime Phone #