

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087548

FILED
May 02, 2004
Secretary of State

Entity Name: HABILITATIVE SERVICES GROUP, INC.

Current Principal Place of Business:

600 BYPASS DRIVE
SUITE 217
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

600 BYPASS DRIVE
SUITE 217
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 94-3373401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBINSON, JEAN F
536 CYPRESS BEND
OLDSMARABLES, FL 34677 US

Name and Address of New Registered Agent:

SPIEGEL AND UTRERA, PA
1840 CORAL WAY
4TH FLOOR
MIAMI, FL 33145 US

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.

SIGNATURE: NATALIA UTRERA

05/02/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ROBINSON, JEAN F
Address: 600 BYPASS DRIVE; SUITE 217
City-St-Zip: CLEARWATER, FL 33764

Title: VD () Delete
Name: FESTINA, KEMOKAI D
Address: 600 BYPASS DRIVE; SUITE 217
City-St-Zip: CLEARWATER, FL 33764

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: KEMOKAI, FESTINA D
Address: 600 BYPASS DRIVE; SUITE 217
City-St-Zip: CLEARWATER, FL 33764

Title: VD () Change (X) Addition
Name: UDOUTUN, CHARLES E
Address: 600 BYPASS DRIVE; SUITE 217
City-St-Zip: CLEARWATER, FL 33764

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN F. ROBINSON

PSTD

05/02/2004

Electronic Signature of Signing Officer or Director

Date