## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 02, 2004 8:00 am Secretary of State 04-02-2004 90069 023 \*\*\*150.00 **DOCUMENT # P00000094554** 1. Entity Name CLUB SHED, INC. 24033628 Principal Place of Business Mailing Address 113 JUBILEE CIR 113 JUBILEE CIR DAYTONA BEACH, FL 32124 DAYTONA BEACH, FL 32124 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03292004 Chg-P CR2E034 (10/03) 4. FEI Number City & State City & State Applied For 59-3731898 Not Applicable Ziρ Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEDROSIAN, SIRVART K Street Address (P.O. Box Number is Not Acceptable) 113 JUBILEE CIR DAYTONA BEACH, FL 32124 Zip Code 8.º 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 , O. 11. **PVST** Delete ■ Addition ☐ Change TITLE TITLE BEDROSIAN, SIRVART K NAME NAME SWEET ADDRESS 113 JUBLIEE CIR STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32124 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP-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:

FILED

SIRVART K. PSEDROSIAN DIRECTOR