## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## 03-17-2004 90036 040 \*\*\*100.00 DOCUMENT # P00000105250 04-13-2004 90034 024 \*\*\*\*50.00 1. Entity Name MAITLAND 175 INC. Principal Place of Business Mailing Address 94051627 6633 LAKE CANE DR. 6633 LAKE CANE DR. ORLANDO, FL 32819 ORLANDO, FL 32819 02182004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3679999 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HSUEH, MARIA TE DO-NOT-WRITE 6633 LAKE CANE DR. ORLANDO, FL 32819 IN THIS SPACE 8. The above named entity suppriss 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 register DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE DP HSUEH, MARIA NAME STREET ADDRESS 6633 LAKE CANE DR. CITY-ST-ZP ORLANDO, FL 32819 . MLE NAME STREET ADDRESS CHTY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE: IN-THIS-SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 where employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if Daytime Phone

FILED

Apr 13, 2004 8:00 am Secretary of State