2004 FOR PROFIT CORPORATION

Sep 10, 2004 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P00000108240 1. Entity Name JOHNSON SERVICES.COM, INC. Principal Place of Business Mailing Address 548 DOLPHIN AVÉ SOUTHEAST 548 DOLPHIN AVE SOUTHEAST ST PETERSBURG, FL 33705 ST PETERSBURG, FL 33705 09082004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied Fo 01-0565001 Not Applic \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE JOHNSON, JON D 548 DOLPHIN AVE SOUTHEAST IN THIS SPACE ST PETERSBURG, FL 33705 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 acc the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agont signature required when reinstalling) 9. Election Campaign Financing **\$5.00** May Be in accordance with s. 607.193(2)(b), F.S., th FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. **PVTS** TITLE NAME JOHNSON, JON D STREET ADDRESS 548 DOLPHIN AVE SOUTHEAST U00000172078 09/10/04-80002-007 150.00 ST PETERSBURG, FL 33705 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MAME STREET ADDRESS CITY-ST-ZIP

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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 informatindicated 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 direct of the corporation or the reference of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block. with an address, with all other like empowered.

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TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP