2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108826

Entity Name: ISLAND TANNING, INC.

FILED Mar 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10175 S FEDERAL HWY PORT SAINT LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

10175 S FEDERAL HWY PORT SAINT LUCIE, FL 34952

FEI Number: 65-1061157 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MADDEN, JOHN W ESQ. LALLOO, AIDA S

759 S. FEDERAL HWY., SUITE 212 1743 SE BERKSHIRE BLVD STUART, FL 34994 PORT ST. LUCIE, FL 34952

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: AIDA LALLOO 03/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: S (X) Change () Addition

Name: LALLOO, AIDA Name: LALLOO, AIDA

 Address:
 422 SE STARFLOWER AVE.
 Address:
 1743 SE BERKSHIRE BLVD

 City-St-Zip:
 PT. ST. LUCIE, FL 34983
 City-St-Zip:
 PT. ST. LUCIE, FL 34952

Name: LALLOO, WAYNE Name: LALLOO, WAYNE

 Address:
 422 SE STARFLOWER AVE.
 Address:
 1743 SE BERKSHIRE BLVD

 City-St-Zip:
 PT. ST. LUCIE, FL 34983
 City-St-Zip:
 PT. ST. LUCIE, FL 34952

Title: P () Delete Title: () Change () Addition

 Name:
 LALLOO, RAMON
 Name:

 Address:
 1651 SE GOUCHO AVE
 Address:

 City-St-Zip:
 PORT SAINT LUCIE, FL 34952
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 LALLOO, CHERYL
 Name:

 Address:
 1651 SE GOUCHO AVE
 Address:

 City-St-Zip:
 PORT SAINT LUCIE, FL 34952
 City-St-Zip:

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: AIDA LALLOO S 03/30/2004