2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mailing Address

3004 BEECH ST. LAKE PLACID FL 33852

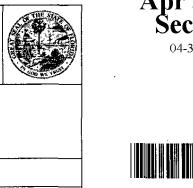
DOCUMENT # P00000116600

1. Entity Name

AT MAUL SERVICES, INC.

Principal Place of Business

3004 BEECH ST. LAKE PLACID FL 33852



FILED Apr 30, 2004 8:00 am Secretary of State

04-30-2004 90328 032 ***150.00

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2. Principal P	lace of Busin	ess	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				MOORE CR2E034 (11/03)		
City & State	e		City & State	City & State			FEI Number 65-1069490 Applied For Not Applicate	ole.	
Zip	_	Country	Zip	Zip Count		5. 0	Certificate of Status Desired See Required		
	6. Name	and Address of Curre	nt Registered Agent	1		7. N	Name and Address of New Registered Agent	\dashv	
			Name						
300	JL, ARTH 4 BEECH (E PLACII	ÙR ST. D FL 33852				Street Address (P.O. Box Number is Not Acceptable)			
					City		FL Zip Code		
			for the purpose of changing its	registere	ed office or registr	ered age	ent, or both, in the State of Florida. I am familiar with, and acce	ot	
the obligat	ions of regist	ered agent.							
SIGNATURE									
SIGNATORE.	Signature, typed	or printed name of registered ag	ent and title if applicable. (NOTE	E: Registere	d Agent signature require	ed when re	pinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1; 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	,	
#\$550.53 (#5560.03) 10.		OFFICERS AN	ND DIRECTORS	11.		AD.	DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	ᅱ	
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indicated of the cor	certify that th I on this repo rporation or ti	e information supplied v rt or supplemental repor ne receiver or trustee er	vitin this filing does not qualify for it is true and accurate and that r inpowered to execute this report	r tne exe ny signa : as requi	mption stated in S ture shall have the ired by Chapter 6	section of same to 07, Flori	119.07(3)(i), Florida Statutes. I further certify that the information legal effect as if made under oath; that I am an officer or directorida Statutes; and that my name appears in Block 10 or Block 11	ır if	

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

4-26-04 (803)531-014