2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA **DOCUMENT # P01000006099** 1. Entity Name CONSUMER CHOICE SERVICES INC. 04 MAR 26 AM 11: 17 Principal Place of Business Mailing Address 2930 MODRED LN. 2930 MODRED LN. TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 03252004 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number 59-3697545 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CLARK, VICTOR A 2930 MODRED LN. TALLAHASSEE, FL 32301 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 accept the obligations of registered agent: SIGNATURE (NOTE: Registered Agent signature required when reinstating) 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 10. TITLE NAME CLARK, VICTOR A STREET ADDRESS 2930 MODRED LN 700031763707 C(TY-ST-ZIP TALLAHASSEE, FL 32301 .04/05/04--01008--005 ***158.75 TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CRY-ST-ZIP TITLE NAME STREET ADDRESS C/TY-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-tike empowered. SIGNATURE: Daytime Phone