2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032886

Entity Name: SOLID PERFECTION, INC.

FILED Apr 07, 2004 Secretary of State

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

1011 THOMAS AVE LEESBURG, FL 34748

Current Mailing Address: New Mailing Address:

1011 THOMAS AVE LEESBURG, FL 34748

FEI Number: 59-3709165 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:

SPIEGEL & UTRERA, P.A.

343 ALMERIA AVENUE

BIEST, RENATE A
2127 LOMAX DR

CORAL GABLES, FL 33134 US FRUITLAND PARK, FL 34731 US

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: RENATE A BIEST 04/07/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:BIEST, SPENCER RName:BIEST, SPENCER RAddress:115 TWIN RIVER DRAddress:2127 LOMAX DR

City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: VPT () Delete Title: VP (X) Change () Addition Name: FRIEND, ROBERT R Name: FRIEND, ROBERT R

Name: FRIEND, ROBERT R

Address: 2223 LIVE OAK DR

City-St-Zip: FRUITLAND PARK, FL 34731

Name: FRIEND, ROBERT R

Address: 2223 LIVE OAK DR

City-St-Zip: FRUITLAND PARK, FL 34731 US

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

 Name:
 Name:
 KNAUS, MARTHANN F

 Address:
 2223 LIVE OAK DR

City-St-Zip: City-St-Zip: FRUITLAND PARK, FL 34731 US

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

Name: Name: BIEST, RENATE A Address: Address: 2127 LOMAX DR

City-St-Zip: City-St-Zip: FRUITLAND PARK, FL 34731 US

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: RENATE A BIEST T 04/07/2004