


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P01000033905 |  |
| 1. Entity Name MICRO/RF ASSOCIATES, INC. | |

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| Principal Place of Business 1083 NORTH COLLIER ROAD, #381 MARCO ISLAND, FL 34145 | Mailing Address 1083 NORTH COLLIER ROAD, #381 MARCO ISLAND, FL 34145 |
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DO NOT WRITE IN THIS SPACE

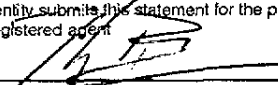


02142004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 59-3709499 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent BARDON, KENNETH 1083 NORTH COLLIER ROAD, #381 MARCO ISLAND, FL 34145 |
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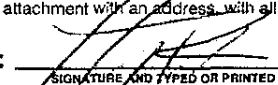
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| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. | | |
| SIGNATURE  | Kenneth Bardon | 2/14/04 |
| Signature, typed or printed name of registered agent and title if applicable | | (NOTE: Registered Agent signature required when re-appointing) |
| | | DATE |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P KENENTH, BARDON 1083 N COLLIER BLVD MARCO ISLAND, FL 34145 |
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02/16/04-80152-024 150.00

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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)(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 like empowered. | | | |
| SIGNATURE:  | Kenneth Bardon | 2/14/04 | 2356825459 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date | Daytime Phone # |