

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90355 002 ***178.50

DOCUMENT # P01000037586 1. Entity Name CENTURION ONE CORPORATION			
Principal Place of Business 6601 LYONS ROAD SUITE E-3 COCONUT CREEK, FL 33073		Mailing Address 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825	
2. Principal Place of Business 16275 SW 88 ST. SUITE 146 MIAMI, FLORIDA 33196		3. Mailing Address 16275 SW 88 ST. SUITE 146 MIAMI, FLORIDA 33196	
4. FEI Number 01-0604780		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		04262004 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent BURKHART, ALMA 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825		7. Name and Address of New Registered Agent Name ALMA BURKHART Street Address (P.O. Box Number is Not Acceptable) 2936 HOLIDAY BEACH ROAD City AVON PARK FL Zip Code 33825	
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 <u><i>Alma Burkhardt</i></u> ALMA BURKHART DATE 4-26-04 (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP CEO BRYSON, JORGE 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP CEO BRYSON, JORGE 16275 SW 88 ST. SUITE 146 MIAMI, FLA 33196	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP P BRYSON, JORGE 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP P BRYSON, JORGE 16275 SW 88 ST. SUITE 146 MIAMI, FLA 33196	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP S BRYSON, LORETTA 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP S BRYSON, LORETTA 16275 SW 88 ST SUITE 146 MIAMI, FLA 33196	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP T BRYSON, LORETTA 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP T BRYSON, LORETTA 16275 SW 88 ST. SUITE 146 MIAMI, FLA 33196	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP COB BRYSON, LORETTA 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP COB BRYSON, LORETTA 16275 SW 88 ST SUITE 146 MIAMI, FLA 33196	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VP ESPINEL, RICK 1930 STATE ROAD SOUTH 17 AVON PARK, FL 33825	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP (Empty)	☐ Change ☐ Addition
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, without other like empowered.			
SIGNATURE: <u><i>George Bryson</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		GEORGE BRYSON PRESIDENT 305 205 1915 Date Daytime Phone #	