

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044449

FILED
May 01, 2004
Secretary of State

Entity Name: DEMISLAYER, INC.

Current Principal Place of Business:

118 WEST ORANGE STREET
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

416 EAST HILLCREST
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

118 WEST ORANGE STREET
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

475 MONTGOMERY PL
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3713810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

KELLEY GOLDBERG LEACH & COHN PL
475 MONTGOMERY PL
ALTAMONTE SPRINGS, FL 32714 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: RUSSELL GOLDBERG

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: MCCABE, DENISE
Address: 118 WEST ORANGE STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VTD () Delete
Name: MCCABE, MICHAEL
Address: 118 WEST ORANGE STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: MCCABE, DENISE
Address: 416 EAST HILLCREST
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VTD (X) Change () Addition
Name: MCCABE, MICHAEL
Address: 416 EAST HILLCREST
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: DENISE MCCABE

PST

05/01/2004

Electronic Signature of Signing Officer or Director

Date