2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000060038

Entity Name

ANDREWS & ASSOCIATES LAW FIRM, P.A.



Principal Place of Business

498 PALM SPRINGS DRIVE

SUITE 100

ALTAMONTE SPRINGS, FL 32701

Mailing Address

498 PALM SPRINGS DRIVE

SUITE 100

ALTAMONTE SPRINGS, FL 32701

FILED Feb 03, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01132004 No Chg-P CR2E034 (10/03)

4. FE! Number 59-3727476

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

ANDREWS, KENNETH ESQ. 498 PALM SPRINGS DRIVE SUITE 100

ALTAMONTE SPRINGS, FL 32701

DO NOT WRITE IN THIS SPACE

ALIAMONTE SPRINGS, FL 32701			IN THIS STAGE		
8. The above the obligat	named entity submits this statement for the prions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE			Agent algnature required when reinstating) DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Finant Trust Fund Contribution.	cing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREWS, KENNETH ESQ. 498 PALM SPRINGS DRIVE #100 ALTAMONTE SPRINGS, FL 32701	-			U00000030139 02/04/04-80098-002 150.00
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TITLE NAME STREET ADDRESS		;			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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:

CITY-ST-ZIP

AUTE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/04

407 241- 9730 Daytine Phone