2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071263

Title:

Name:

Address: City-St-Zip: (X) Delete

FAIRCHILD, PATRICIA G

LONGWOOD, FL 32779

3913 VILLAS GREEN CIRCLE

FILED Apr 24, 2004 Secretary of State

Entity Name: J.C.I. ECO SOLUTIONS, INC. **Current Principal Place of Business: New Principal Place of Business:** 410 MANOR RD. MAITLAND, FL 327515762 **Current Mailing Address: New Mailing Address:** 410 MANOR RD. MAITLAND, FL 327515762 FEI Number: 59-3740460 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: ROBINSON, JOHN E JR. 410 MANOR RD. MAITLAND, FL 327515762 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROBINSON, JOHN E JR. ROBINSON, JOHN E JR. Name: Name: 410 MANOR RD. 2170 PARK MAITLAND COURT Address: Address: City-St-Zip: MAITLAND, FL 327515762 City-St-Zip: MAITLAND, FL 327515212 () Delete Title: Title: () Change () Addition Name: TODD, BONNIE O Name: 3913 VILLAS GREEN CIRCLE Address: Address: LONGWOOD, FL 32779 City-St-Zip: City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN E ROBINSON JR D 04/24/2004

() Change () Addition