2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2004
Secretary of State

DOCUMENT# P01000072484

Entity Name: HARDWARE & BUSINESS SOLUTIONS, INC.

Current Principal Place of Business:

104 MAGNOLIA LANE
PALATKA, FL 321778882

New Principal Place of Business:

Current Mailing Address:

104 MAGNOLIA LANE
PALATKA, FL 321778882

New Mailing Address:

FEI Number: 59-3733180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEFFIELD, CATHERINE H
104 MAGNOLIA LANE
PALATKA, FL 321778882

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHEFFIELD, CATHERINE H
Address: 104 MAGNOLIA LANE
City-St-Zip: PALATKA, FL 321778882

Title: D ( ) Delete
Name: SHEFFIELD, RODNEY C
Address: 104 MAGNOLIA LANE
City-St-Zip: PALATKA, FL 321778882

Title: D ( ) Delete
Name: SHEFFIELD, CASEY J
Address: 325 HWY 315 N
City-St-Zip: INTERLACHEN, FL 32148

Title: D ( ) Delete
Name: SHEFFIELD, JASON I
Address: 126 RAINTREE TRAIL
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SHEFFIELD, CASEY J
Address: 104 MAGNOLIA LANE
City-St-Zip: PALATKA, FL 32177

Title: D (X) Change ( ) Addition
Name: SHEFFIELD, JASON I
Address: 114 CONFEDERATE POINT DRIVE
City-St-Zip: PALATKA, FL 32177

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: CATHERINE H SHEFFIELD P 07/05/2004

Electronic Signature of Signing Officer or Director — Date