## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000073012

LONGWOOD, FL 32779

City-St-Zip:

Apr 27, 2004 Secretary of State

Entity Name: MEDALLION ENERGY, INC. **Current Principal Place of Business: New Principal Place of Business:** 304 SWEETWATER COVE BLVD N LONGWOOD, FL 32779 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 916035 P.O. BOX 916035 LONGWOOD, FL 32791 LONGWOOD, FL 32791 FEI Number: 59-3744349 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: DIROFF, JAMES A 304 SWEETWATER COVE BLVD., N. LONGWOOD, FL 32779 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 () Change () Addition DIROFF, JAMES A Name: Name: 304 SWEETWATER COVE BLVD. NORTH Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: ( ) Delete Title: VΡ Title: () Change () Addition DIROFF, DENISE Name: Name: 304 SWEETWATER COVE BLVD. NORTH Address: Address:

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 Statutés. 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.

VΡ SIGNATURE: JAMES A. DIROFF 04/27/2004