

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000089029

FILED
May 10, 2004
Secretary of State

Entity Name: SHOEMAKERS MISCELLANEOUS WORKS, INC.

Current Principal Place of Business:

12349 SW HWY #42
WEIRSDALE, FL 32195

New Principal Place of Business:

12349 SE HWY #42
WEIRSDALE, FL 32195

Current Mailing Address:

12349 SW HWY #42
WEIRSDALE, FL 32195

New Mailing Address:

12349 SE HWY #42
WEIRSDALE, FL 32195

FEI Number: 59-3755240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOEMAKER, COLENA F
12349 SW HWY #42
WEIRSDALE, FL 32195 US

Name and Address of New Registered Agent:

SHOEMAKER, COLENA F
12349 SE HWY #42
WEIRSDALE, FL 32195 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:

05/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHOEMAKER, TONY A
Address: 12349 SW HWY #42
City-St-Zip: WEIRSDALE, FL 32195

Title: D () Delete
Name: SHOEMAKER, COLENA F
Address: 12349 SW HWY #42
City-St-Zip: WEIRSDALE, FL 32195

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHOEMAKER, TONY A
Address: 12349 SE HWY #42
City-St-Zip: WEIRSDALE, FL 32195

Title: D (X) Change () Addition
Name: SHOEMAKER, COLENA F
Address: 12349 SE HWY #42
City-St-Zip: WEIRSDALE, FL 32195

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: COLENA SHOEMAKER

D

05/10/2004

Electronic Signature of Signing Officer or Director

Date