2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004
Secretary of State

DOCUMENT# P01000094750

Entity Name: PADDED CELL, INC.

Current Principal Place of Business:

712 MISSION HILL RXD
BOYNTON BEACH, FL 33435

New Principal Place of Business:

712 MISSION HILL ROAD
BOYNTON BEACH, FL 33435

Current Mailing Address:

3550 POMONA LANE
COCONUT GROVE, FL 33131

New Mailing Address:

712 MISSION HILL ROAD
BOYNTON BEACH, FL 33435

FEI Number: 65-1142628 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMERON, BYRON L
3550 POMONA LANE
COCONUT GROVE, FL 33131

Name and Address of New Registered Agent:

CAMERON, BYRON L
712 MISSION HILL ROAD
BOYNTON BEACH, FL 33435

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: BYRON L. CAMERON 04/23/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CAMERON, BYRON L
Address: 3550 POMONA LANE
City-St-Zip: COCONUT GROVE, FL 33131

Title: S ( ) Delete
Name: CHRISTIAN, SANDRA L
Address: 3550 POMONA LN
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CAMERON, BYRON L
Address: 712 MISSION HILL ROAD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S (X) Change ( ) Addition
Name: CHRISTIAN, SANDRA L
Address: 712 MISSION HILL ROAD
City-St-Zip: BOYNTON BEACH, FL 33435

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: BYRON L. CAMERON PD 04/23/2004
Electronic Signature of Signing Officer or Director Date