## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 16, 2004 08:00 AM Secretary of State

DOCUMENT # P01000 1. Entity Name AIS INC.	103130
Principal Place of Business	Masing Address
672 STILL MEADOWS CIRCLE EAST PALM HARBOR, FL 34683	672 STILL MEADOWS CIRCLE EAST Palm Harbor, FL 34683

DO NOT WRITE IN THIS SPACE



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No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3712823

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACNEIL, MICHAEL 672 STILL MEADOWS CIRCLE EAST PALM HARBOR, FL 34683

## DO NOT WRITE IN THIS SPACE

				***	
	named entity submits this statement for the ions of registreat agent.		d office or r		th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	e if applicable (NOTE, Registered	Agent signature	e réquired when reinstating)	DATE
FILE NOWI!! FEE IS \$550.00 9. Election Campaign Finance Due by September 8, 2004 Trust Fund Contribution.		cing []	\$5.00 May Be Added to Fees	000000166701 07/16/04-80007-016 550.00	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CXTY-ST-ZIP	D MACNEIL, MICHAEL 672 STILL MEADOWS CIRCLE EAS' PALM HARBOR, FL 34683	ī .			
TEILE RAME STREET ADDRESS CITY-ST-ZIP	D MACNEIL, HELENE 672 STILL MEADOWS CIRCLE EAS PALM HARBOR, FL 34683	r	· · · · · · ·		
TITLE NAME STREET ADDRESS CHY-ST-ZIP				DO	NOT WRITE
TITLE HAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ACCRESS CITY-ST-ZIP					
TIPLE NAME STREET ADDRESS CITY - ST - ZIP					
12. I hereby of	certify that the information supplied with this on this report or supplemental report is true	filing does not qualify for the exer and accurate and that my signal	nption state ure shall ha	d in Section 119.07(3)( ve the same legal effec	i), Florida Statutes. I further centify that the information it as if made under oath; that I am an officer or director

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

7-14-04

7)7-766-7009

Date Saying Prote #