2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED • Jan 20, 2004 08:00 AM DOCUMENT # P01000108551 **Secretary of State** 1. Entity Name TSC EVENTS, INC. Principal Place of Business Mailing Address 1125 MCDONALD ST. PO BOX 1744 MT. DORA, FL 32757 MT. DORA, FL 32756 01052004 CR2E034 (10/03) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3755227 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TALLGREN, ROBERT W DO NOT WRITE 1125 MCDONALD ST. MT. DORA, FL 32757 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE TALLGREN, ROBERT W NAME STREET ADDRESS 1125 MCDONALD ST. CITY-ST-ZIP MT. DORA, FL 32757 TITLE U00000007246 SABATINI, JOSEPH R NAME 01/20/04-80015-013 158.75 STREET ADDRESS 110 E. THIRD AVE. MT. DORA, FL 32757 CITY-ST-ZIP TITLE CRABTREE, JOYCE E NAME STREET ADDRESS 1125 MCDONALD ST. DO NOT WRITE CITY-ST-ZIP MT. DORA, FL 32757 IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 like empowered

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STREET ADDRESS CITY-ST-ZIP