2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # P01000115673** 03-01-2004 90046 015 ***150.00 1. Entity Name DAVID JONES, INC. Principal Place of Business Mailing Address ひょくんんしいし 7924 LANDMARK CIR. S. 7924 LANDMARK CIR. S. TIERRA VERDE, FL 33715 TIERRA VERDE, FL 33715 3. Mailing Address 2. Principal Place of Business 924 LANDMARK CIR. S 924 HANDMARK Suite, Apt. #, etc Suite, Apt. #, etc 01062004 CR2E034 (10/03) Chg-P Applied For City & State City & State 4. FFI Number LERIZA TIERRA 59-3760419 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JONES, DAVID Street Address (P.O. Box Number is Not Acceptable) 924 LANDMARK CIR. S. TIERRA VERDE, FL 33715 Zip Code 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 Florida. I am familiar with, and accept the obligation SIGNATURE t and title il applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP TITLE ☐ Detete TITLE JONES, DAVID NAME NAME STREET ADDRESS 924 LANDMARK CIR. S. STREET ADDRESS CITY-ST-ZIP TIERRA VERDE, FL 33715 CITY-ST-ZIP DS ☐ Change TITLE ☐ Delete TITLE Addition JONES, RENE NAME NAME STREET ADDRESS 924 LANDMARK CIR. S. STREET ADDRESS TIERRA VERDE, FL 33715 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 人名阿内拉克斯格拉 化物质分离气管 人名 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this report as suppliemental 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 SIGNATURE: GNING OFFICER OR DIRECTOR

FILED

Mar 01, 2004 8:00 am