

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001426

Entity Name: F.E.L. INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

4630 NUNIVERSITY DR, STE 313
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

4630 NUNIVERSITY DR, STE 313
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-2145867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, ANTHONY G JR
3275 W HILLSBORO BLVD, #207
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, STEVEN
Address: 4630 NUNIVERSITY DR, STE 313
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: EISENBERG, MARGARET
Address: 4630 NUNIVERSITY DR, STE 313
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: DOYLE, KEVIN
Address: 2655 NW 114TH AVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: PASTORE, JONATHAN
Address: 4630 NUNIVERSITY DR, STE 313
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KEVIN DOYLE

VP

04/30/2004

Electronic Signature of Signing Officer or Director

Date