

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

05-03-2004 90687 050 ***900.00

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04 MAY 20 PM 1:10


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04



MOORE

CR2E034 (11/03)

DOCUMENT # P02000003343					
1. Entity Name FLORIDA ENERGY, INC.					
Principal Place of Business 17275-5 BOCA CLUB BOULEVARD BOCA RATON FL 33487			Mailing Address 17275-5 BOCA CLUB BOULEVARD BOCA RATON FL 33487		
2. Principal Place of Business 101 NE Jettie Terrace Suite, Apt. #, etc.			3. Mailing Address 101 NE Jettie Terrace Suite, Apt. #, etc.		
City & State Port St. Lucie, FL			City & State Port St. Lucie FL		
Zip 34983	Country St. Lucie	Zip 34983	Country St. Lucie	4. FEI Number 01-0565031	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input checked="" type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BRUNER, STEPHEN E 17275-5 BOCA CLUB BOULEVARD BOCA RATON FL 33487				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 101 NE Jettie Terrace City Port St. Lucie, FL Zip Code 34983	
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 obligations of registered agent. SIGNATURE <u>Stephen E. Bruner</u> <u>Stephen E. Bruner</u> DATE <u>4-29-04</u> <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!!! FEE IS \$150.00 After May 1, 2004, Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bruner, Stephen E 101 NE Jettie Terrace Port St. Lucie, FL 34983 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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.					
SIGNATURE: Stephen E. Bruner <u>Stephen E. Bruner</u> <u>4-29-04</u> <u>772.3443145</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					