## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## FILED May 03, 2004 8:00 am Secretary of State

05-03-2004 90733 020 \*\*\*150.00

1. Entity Name	MENT # P0: z construct		9155					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3 020 ***1	
Principal Place			Mailing Addres	IT RD						
ACKSONVILL	E, FL 32226		JACKSONVILLI	E, FL 32226	ì				reini (1881 2115) 2(1	(A.W.) 11. 1887
Principal Pl	lace of Business		3. Mailing Addr	ess						
Suite, Apt. #, etc.			Suite. Apt. #, etc.			04292004 Chg-P		CR2E034 (10/03)		
City & State	e		City & State			4. FEI Number 32-0001			<u> </u>	plied For t Applicable
Zip	Countr	,	Zip	(	Country		f Status Desired		\$8.75 Add	itional
	6. Name and Add	ess of Current	Registered Agent			7. Name and A	ddress of New R	egistered	Agent	
·^				-	Name					
SCHUETZ, JASON 10403 SAWPIT RD JACKSONVILLE, FL 32226					Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
ACKOON	VILLE, I E SEEZO				0.0				7:01	•
	namedjentity sübmits	this statement for		nanging its reg	City	istered agent, or both	in the State of Flo	FL orida, Lam		
the chilers	ions of registered ager	it.	ar the parpoon of an		grataroa armaa ar vagr		,			a 2000p.
me opagati	iona or rogidia od dgar					ž.				
IGNATURE_	Signature, typed or printed national states of the states	ne of registered agen	and title if applicable for	(NOTE: Re	agistered Agent signature req	guired when reinstating)	KIII. ADVIN	DATE		165. A.
IGNATURE_ FILI After Ma	Signature, Moed or printed no E NOW!!! FEE IS ay, 1, 2004 Fee is	ne of registered agen	9. Election	(NOTE Re on Campaigh) Fund Contribu	Financing a distribution	\$5.00 May Be Added to Fees		DATE		
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ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR