2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009696

Entity Name: KNIGHTMARE APPAREL, INC.

FILED Apr 26, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32256

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

10203 BLANCHARD PARK TRAIL 9480 PRINCETON SQUARE BLVD S

APT. 2225 #514

ORLANDO, FL 32817 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

10203 BLANCHARD PARK TRAIL 9480 PRINCETON SQUARE BLVD S

APT. 2225 #514

ORLANDO, FL 32817 JACKSONVILLE, FL 32256

FEI Number: 03-0390324 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WORSDELL, JEFFREY M WORSDELL, JEFFREY M

10203 BLANCHARD PARK TRAIL 9480 PRINCETON SQUARE BLVD S

APT. 2225 #514 ORLANDO, FL 32817 JACKSONVILLE, FL 32256

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: JEFFREY WORSDELL 04/26/2004

> Electronic Signature of Registered Agent Date

> > Title:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete

WORSDELL, JEFFREY M Name: Name: WORSDELL, JEFFREY M 10203 BLANCHARD PARK TRAIL, APT 2225 9480 PRINCETON SQUARE BLVD S Address: Address:

City-St-Zip: ORLANDO, FL 32817

Title: Title: () Change () Addition () Delete Name: BENCOMO, ANTHONY A Name:

831 RIVECON AVE Address: Address: ORLANDO, FL 32825 City-St-Zip: 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.

Ρ SIGNATURE: JEFFREY WORSDELL 04/26/2004