


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000009938</b> 1. Entity Name INTACT GROUP, INC.	
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Principal Place of Business 157 MIRALOMA LANE PONTE VEDRA BEACH, FL 32082	Mailing Address P.O. BOX 408 PONTE VEDRA BEACH, FL 32004
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**DO NOT WRITE IN THIS SPACE**



04142004 No Chg-P CR2E034 (10/03)

4. FEI Number 37-1419037	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  JANION, ANNA B 157 MIRALOMA LANE PONTE VEDRA BEACH, FL 32082
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO JANION, ANNA B 157 MIRALOMA LANE PONTE VEDRA BEACH, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JANION, MAREK 157 MIRALOMA LANE PONTE VEDRA BEACH, FL 32082
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UN00000138379  
04/29/04-80077-020 150.00

**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify 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 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

<b>SIGNATURE:</b> 	MAREK JANION	4/26/04	904-273-9760
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #