

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009994

Entity Name: FM 1, INC.

FILED
Apr 18, 2004
Secretary of State

Current Principal Place of Business:

25 OLD KINGS ROAD NORTH
SUITE 7B
PALM COAST, FL 32137

New Principal Place of Business:

POST OFFICE BOX 354764
PALM COAST, FL 32135

Current Mailing Address:

POST OFFICE BOX 354764
PALM COAST, FL 32135

New Mailing Address:

POST OFFICE BOX 354764
PALM COAST, FL 32135

FEI Number: 01-0663168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PTD () Delete
Name: POKORNY, FRANK
Address: 25 OLD KINGS ROAD NORTH, SUITE 7B
City-St-Zip: PALM COAST, FL 32137

Title: SVD () Delete
Name: KUTSYSHIN, MIKHAIL
Address: 25 OLD KINGS ROAD NORTH, SUITE 7B
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: POKORNY, FRANK
Address: POST OFFICE BOX 354764
City-St-Zip: PALM COAST, FL 32135

Title: SVD (X) Change () Addition
Name: KUTSYSHIN, MIKHAIL
Address: POST OFFICE BOX 354764
City-St-Zip: PALM COAST, FL 32135

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: POKORNY FRANK

PTD

04/18/2004

Electronic Signature of Signing Officer or Director

Date