

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024833

FILED
Feb 03, 2004
Secretary of State

Entity Name: SIGNED AND SEALED, INC.

Current Principal Place of Business:

9226 AMAZON DRIVE
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

4553 GRAND BLVD #204
NEW PORT RICHEY, FL 34652

Current Mailing Address:

9226 AMAZON DRIVE
NEW PORT RICHEY, FL 34655

New Mailing Address:

4553 GRAND BLVD #204
NEW PORT RICHEY, FL 34652

FEI Number: 04-3611409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOHMANN, CHRISTINA
9226 AMAZON DRIVE
NEW PORT RICHEY, FL 34655

Name and Address of New Registered Agent:

LOHMANN, CHRISTINA
4553 GRAND BLVD #204
NEW PORT RICHEY, FL 34652

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:

02/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOHMANN, CHRISTINA
Address: 9226 AMAZON DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOHMANN, CHRISTINA
Address: 4553 GRAND BLVD. #204
City-St-Zip: NEW PORT RICHEY, FL 34652

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: CHRISTINA LOHMANN

PRES

02/03/2004

Electronic Signature of Signing Officer or Director

Date