2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000025968

1. Entity Name
COLOR-FLEX, INC.

Principal Place of Business	Mailing Address
176 TALLADEGA TRAIL	176 TALLADEGA TRAIL
PENSACOLA, FL 32506	PENSACOLA, FL 32506

DO NOT WRITE IN THIS SPACE

04202004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
02-0554003	Not Applicable

5. Certificate of Status Desired — ☐ — **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WULZER, ERNEST C JR
176 TALLADEGA TRAIL
PENSACOLA, FL 32506

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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_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating.)   DATE

FILE NOW!! FEE IS $150.00 **After May 1, 2004 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	WULDER, ERNEST C
STREET ADDRESS	176 TALLADEGA TRL
CITY-ST-ZIP	PENSACOLA, FL 32506

TITLE	STD
NAME	WULZER, REBECCA L
STREET ADDRESS	176 TALLADEGA TRL
CITY-ST-ZIP	PENSACOLA, FL 32506

TITLE	
NAME	
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CITY-ST-ZIP	

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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.

SIGNATURE: x ERNEST C. WULZER JR.   _____ 4-28-4   950-456
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #
5984