2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000034838

1. Entity Name
SNOWFLAKE & CO., INC.

Principal Place of Business	Mailing Address
9119 WOOD DOVE DR. BRADENTON, FL 34202	9119 WOOD DOVE DR. BRADENTON, FL 34202

DO NOT WRITE IN THIS SPACE

01242004 No Chg-P CR2E034 (10/03)

4. FEI Number
02-0620426

Applied For ☐
Not Applicable ☐

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

6. Name and Address of Current Registered Agent

HAVEY, MICHAEL G
9119 WOOD DOVE DR.
BRADENTON, FL 34202

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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: Michael G Havey 3/5/04
signature of registered agent or typed or printed name of registered agent — 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

U00000083273
03/10/04-80032-021 150.00

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	HAVEY, MICHAEL G
STREET ADDRESS	9119 WOOD DOVE DR.
CITY ST ZIP	BRADENTON, FL 34202
TITLE	VSD
NAME	HAVEY, BILLIE R
STREET ADDRESS	9119 WOOD DOVE DR.
CITY ST ZIP	BRADENTON, FL 34202
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

DO NOT WRITE IN THIS SPACE

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: Michael G Havey 3/5/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date