## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jul 26, 2004 08:00 AM **Secretary of State DOCUMENT # P02000040766** PHIL'S TRAINING, INC. Principal Place of Business Mailing Address 5763 S.W. 65 AVE. 5763 S.W. 65 AVE. MIAMI, FL 33143 MIAMI, FL 33143 07122004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1534820 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SHARLET, PHILIP DO NOT WRITE 5763 S.W. 65 AVE. MIAMI, FL 33143 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. Signature, typed or printed name of registered agont and titla if applicable (NOTE Registered Agent Signature required when reinstaling) 181831000000 07/26/04-80003-012 550.00 \$5.00 May Be Added to Fees FILE NOW!!! FEE 18 \$550.00 9. Election Campaign Financing П Trust Fund Contribution. Due by September 8, 2004 10. BILE D SHARLET, PHILIP NAME STREET ADDRESS 5763 S.W. 65 AVE. CITY-ST-ZIP MIAMI, FL 33143 NAME STREET ADDRESS CITY - ST-ZIP THE STREET ADDRESS DO NOT WRITE CITY - ST- 21P TIBLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 emprovered to execuse 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:

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NG OFFICER OR DIRECTOR

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