2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000047402

1. Entity Name

THE BUTLER DOES IT ELITE SERVICES INC.



FILED Apr 23, 2004 08:00 AM Secretary of State

Principal Place of Business

1612 POINT PLEASANT AVE W BRADENTON, FL 34205-6810

Mailing Accress

1612 POINT PLEASANT AVE W BRADENTON, FL 34205-6810



04172004

No Chg-P

CR2E034 (10/03)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8,75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HANNER, BLAIR 1612 POINT PLEASANT AVE W BRADENTON, FL 34205-6810

DO NOT WRITE IN THIS SPACE

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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. If 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) OATE | | | | | |
| FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | | Election Campaign Fin Trust Func Contributio | eancing | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | CTORS | 1 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PRINCIPATO, LESLIE 1612 POINT PLEASANT AVE W BRADENTON, FL 342056810 | | | | U00000126061 04/23/04-80019-019 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CEO HANNER, BLAIR 1612 POINT PLEASANT AVE W BRADENTON, FL 342056810 | | | | 3 N E W 04 00513 513 130.00 |
| TITLE NAME STREET ADDRESS CITY+ST-ZIP | | | | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN ' | THIS SPACE |
| 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 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:

Bleir Hanner

BLAIR HANNER

4/21/44

941.705.6677

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