## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000049546

**Entity Name:** HOLY SMOKE RECORDS INC.

ALTAMONTE SPRINGS, FL 32714

City-St-Zip:

FILED May 01, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 380 SR 434 STE 1004-136 ALTAMONTE SPRINGS, FL 32714 **Current Mailing Address: New Mailing Address:** 380 SR 434 STE 1004-136 ALTAMONTE SPRINGS, FL 32714 FEI Number: 02-0612169 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLS, PAUL E 380 SR 434 STE 1004-136 ALTAMONTE SPRINGS, FL 32714 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PCFO () Delete Title: () Change () Addition MILLS, PAUL Name: Name: 380 SR 434 STE 1004-136 Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: Title: **PCEO** () Delete Title: () Change () Addition Name: MILLS, ADRIENNE H Name: 380 SR 434 STE 1004-136 Address: Address:

City-St-Zip:

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: PAUL MILLS **PCEO** 05/01/2004