2004 FOR PROFIT CORPORATION

SIGNATURE:

Jul 29, 2004 8:00 am **Secretary of State** ANNUAL REPORT DOCUMENT # P02000050281 07-29-2004 90002 027 ***550.00 1. Entity Name AMERICA'S CENTER FOR TRANSLATIONS, INC. Principal Place of Business Mailing Address 54065524 364 CANIS DR SOUTH 364 CANIS DR SOUTH ORANGE PARK, FL 32073 ORANGE PARK, FL 32073 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 06172004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 01-0687785 Not Applicable Zio Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Julieann C. Duncan DUNCAN, BOBBY L Street Address (P.O. Box Number is Not Acceptable) 364 Canis Drive South 364 CANIS DRIVE SOUTH ORANGE PARK, FL. 32073 City Orange Park Zip Code 32073 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 colligations of registered agent. SIGNATURE (NEXTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. STDC X Delete TITLE TITLE ☐ Ghange Addition DUNCAN, BOBBY L NAME MAME 364 CANIS DRIVE SOUTH STREET ADDRESS STREET ADDRESS CITY-S1-ZIP ORANGE PARK, FL 32073 CRY-ST-ZIP PVDM ☐ Delete X Change ☐ Addition DUNCAN, JULIEANN C NAME NAME Duncan, Julieann C. STREET ADDRESS 364 CANIS DRIVE SOUTH STREET ADDRESS 364 Canis Drive South ORANGE PARK, FL 32073 1 CITY-ST-ZP OTTY-ST-DP Orange Park, FL 32073 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CHY-ST-ZIP Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CRTY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP 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 cath; 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 all other like empowered.

FILED

Attachment

54065534

FORD, BOWLUS, DUSS, MORGAN, KENNEY, SAFER & HAMPTON, P.A. Attorneys at Law

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TRANSMITTAL MEMORANDUM

TO:

Division of Corporations

P.O. Box 1500

Tallahassee, FL 32302-1500

FROM:

Eliot J. Safer, Esquire

RE:

America's Center for Translations, Inc.

DATE:

July 28, 2004

I enclose the following for your information:

1. 2004 for Profit Corporation Annual Report; and

2. Check No. 1990 for \$550.00 representing the filing fee.

Please call me if you have any questions.

cc w/enclosure: Julieann C. Duncan

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