

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2004 8:00 am
Secretary of State

01-27-2004 90004 048 ***150.00

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01152004 Chg-P CR2E034 (10/03)

4. FEI Number **01-0715668** Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARIETTA, PAMELA
~~7601 KINGSLEY COURT~~
LAKE WORTH, FL 33467

New address →

Name
Street Address (P.O. Box Number is Not Acceptable)
5605 2nd ROAD

City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) 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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS MARIETTA, PAMELA
CITY-ST-ZIP ~~7601 KINGSLEY COURT~~
LAKE WORTH, FL 33467

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5605 2nd ROAD**
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS MARIETTA, ROBERT
CITY-ST-ZIP ~~7601 KINGSLEY COURT~~
LAKE WORTH, FL 33467

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5605 2nd ROAD**
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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: Pamela A. Marietta president 1-22-04 357-5742
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Pamela A. Marietta