FILED
May 10, 2004 08:00
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000065569

1. Entity Name
DREDNOUGHT, INC.

Principal Place of Business
929 JAMAICA RD.
VENICE, FL 34293

Mailing Address
929 JAMAICA RD.
VENICE, FL 34293

04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
82-0552986

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MATTHEWS, D. TURNER ESQ
6350 GULF OF MEXICO DRIVE SUITE 103
LONGBOAT KEY, FL 34228

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ 27-04-04
Signature, typed or printed name of registered agent and title if applicable. (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

U00000159648
05/10/04-80040-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SMITH, LADY DIANE
STREET ADDRESS	929 JAMAICA ROAD
CITY-ST-ZIP	VENICE, FL 34293
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: D. Smith DIANE SMITH 27-04-04
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date

Daytime Phone #