

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066829

FILED
Feb 10, 2004
Secretary of State

Entity Name: LIMA MIKE, INCORPORATED

Current Principal Place of Business:

2107 S. MANHATTEN AVE.
TAMPA, FL 33629

New Principal Place of Business:

3301 BAYSHORE BLVD
UNIT 2201
TAMPA, FL 33629

Current Mailing Address:

2107 S. MANHATTEN AVE.
TAMPA, FL 33629

New Mailing Address:

3301 BAYSHORE BLVD
UNIT 2201
TAMPA, FL 33629

FEI Number: 74-3047512

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDRIJESKI, ARNOLD H
2107 S. MANHATTEN AVE.
TAMPA, FL 33629

Name and Address of New Registered Agent:

ANDRIJESKI, ARNOLD H
3301 BAYSHORE BLVD
UNIT 2201
TAMPA, FL 33629

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: ARNOLD H. ANDRIJESKI

02/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANDRIJESKI, ARNOLD H
Address: 2107 S. MANHATTEN AVE.
City-St-Zip: TAMPA, FL 33629

Title: V () Delete
Name: THOMPSON, LESLIE A
Address: 2107 S. MANHATTEN AVE.
City-St-Zip: TAMPA, FL 33629

Title: ST () Delete
Name: ANDRIJESKI, JOANN T
Address: 2107 S. MANHATTEN AVE.
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANDRIJESKI, ARNOLD H
Address: 3301 BAYSHORE BLVD UNIT 2201
City-St-Zip: TAMPA, FL 33629

Title: V (X) Change () Addition
Name: THOMPSON, LESLIE A
Address: 3301 BAYSHORE BLVD UNIT 2201
City-St-Zip: TAMPA, FL 33629

Title: ST (X) Change () Addition
Name: ANDRIJESKI, JOANN T
Address: 3301 BAYSHORE BLVD UNIT 2201
City-St-Zip: TAMPA, FL 33629

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: ARNOLD H. ANDRIJESKI

P

02/10/2004

Electronic Signature of Signing Officer or Director

Date