2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 19, 2004 08:00 AM Secretary of State **DOCUMENT # P02000080698** 1. Entity Name SIU, INC. Mailing Address Principal Place of Business 4159 CORPORATE COURT 4159 CORPORATE COURT STE A STE A PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 CR2E034 (10/03) 03182004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 55-0788027 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent POSTLETHWAITE, LINDA DO NOT WRITE 4159 CORPORATE COURT PALM HARBOR, FL 34683 IN THIS SPACE 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. (NOTE. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME POSTLETHWAITE, JOHN 4159 CORPORATE CT U00000117965 U4/19/04-80041-002 150.00 STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34683 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 eath; that I am an officer or director of the corporation or the receiver of trustee empewered to produce the report as manufactory of the corporation or the receiver of trustee empewered to produce the report as manufactory or or an appear of the receiver of trustee empewered to produce the report as manufactory or or an appear of the receiver of th

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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