


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000086899 1. Entity Name CLOCKS GALORE, INC.	
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Principal Place of Business 11000 PROSPERITY FARMS RD 301 PALM BEACH GARDENS, FL 33410	Mailing Address 11000 PROSPERITY FARMS RD 301 PALM BEACH GARDENS, FL 33410
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MAY, DALE M 11000 PROSPERITY FARMS RD 301 PALM BEACH GARDENS, FL 33410
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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: <u><i>Dale M. May</i></u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE: <u>4-20-04</u>

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UD00000123958 04/22/04-80025-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDT MAY, DENNIS M 11000 PROSPERITY FARMS RD PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VDS MAY, DALE M 11000 PROSPERITY FARMS RD PALM BEACH GARDENS, FL 33410
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u><i>Dale M. May</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE: <u>4-20-04</u> <small>Daytime Phone #</small> <u>581-630-2726</u>