2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 03, 2004 08:00 AM Secretary of State

			<u> </u>	<u></u>	Secre	tary of State
1. Entity Nam	MENT # P020000896 T HAVEN, INC.	865			Secre	tary or state
Principal Place 124 SOUTHE CAPE CORAL	AST 13TH PLACE	Mailing Address 124 SOUTHEAST 13TH PLACE CAPE CORAL, FL 33990	:			
				1 18402481 8	No Cha E	ene papa alle ener energial et le et
DO NOT WRITE IN THIS SPAC				04262004 4. FEI Numb	er	32E034 (10/03) Applied For
				16-1624034 Not Applicab 5. Certificate of Status Desired S8.75 Additional Fee Required		
	6. Name and Address of Current Re	egistered Agent				7 ou riedanos
124 SOUT	MICHAEL S HEAST 13TH PLACE RAL, FL 33990				NOT WRI	
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. It am famillar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (INOTE, Registered Agent signature required when renstating) DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00			\$5.00 May Be Added to Fees	_	
10.	OFFICERS AND D	RECTORS	1			
name Street Address City-ST-Jip	PSTD HOWELL, MICHAEL S 124 SOUTHEAST 13TH PLACE CAPE CORAL, FL 33990				1000000154 105/04/0 4- 801	159 55-022 150.00
HTLE MAME STREET ADDRESS CITY-SI-ZIP						
THE NAME STREET ADDRESS CHY-SI-ZIP				DO	NOT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPAC	CE
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1:TLE NAME 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 cath; 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.						