2004 FOR PROFIT CORPORATION

May 03, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P02000093033 CRAZY DAISY, INC. Principal Place of Business Mailing Address 4115 W SPRUCE ST 4115 W SPRUCE ST TAMPA, FL 33607 TAMPA, FL 33607 03152004 No Cha-P CR2E034 (10/03) ***DO NOT WRITE IN THIS SPACE** Applied For 4. FEI Number 22-3869649 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BUSINESS FILINGS INCORPORATED** DO NOT WRITE 660 EAST JEFFERSON STREET TALLAHASSEE, FL 32301-0000 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 famillar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be U00000146792 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 05/03/04-80079-015 150.00 10. OFFICERS AND DIRECTORS **PVTS** TITLE GLASS, DENISE STREET ADDRESS 4115 W. SPRUCE ST CITY-ST-7IP **TAMPA, FL 33607** TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-7/P TITLE STREET ADDRESS CITY-ST-7IP

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 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

THE NAME STREET ADDRESS

FILED