2004 FOR PROFIT CORPORATION ANNUAL REPORT

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Feb 10, 2004 8:00 am
Secretary of State
01-30-2004 90082 028 ***150.00

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01272004 Chg-P CR2E034 (10/03)

DOCUMENT # P02000103760

1. Entity Name
EAMES INVESTMENTS, INC.

Principal Place of Business	Mailing Address
1402 ROYAL PALM BCH BLVD BLDG 700 ROYAL PALM BCH, FL 33411	1402 ROYAL PALM BCH BLVD BLDG 700 ROYAL PALM BCH, FL 33411

2. Principal Place of Business	3. Mailing Address
1924 S. CLUB DR	1924 S. CLUB DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WELLINGTON, FL	City & State: WELLINGTON, FL
Zip: 33414 Country: USA	Zip: 33414 Country: USA

4. FEI Number: 06-1657011 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EAMES, TIMOTHY 1402 ROYAL PALM BCH BLVD BLDG 700 ROYAL PALM BCH, FL 33411	Name: TIMOTHY EAMES Street Address (P.O. Box Number is Not Acceptable): 1924 S. CLUB DR City: WELLINGTON FL Zip Code: 33414

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: J Eames President DATE: 01/27/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EAMES, TIMOTHY 1402 ROYAL PALM BCH BLVD BLDG 700 ROYAL PALM BCH, FL 33411	☒ Delete	PRESIDENT TIMOTHY EAMES 1924 S. CLUB DR, WELLINGTON, FL 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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 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: J Eames 01/27/04 (561) 202-4974
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #