

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104383

FILED
Apr 27, 2004
Secretary of State

Entity Name: THE SUBLIME GARDEN, INC.

Current Principal Place of Business:

4260 HERSCHAL ST
JACKSONVILLE, FL 322110

New Principal Place of Business:

4260 HERSCHEL ST
JACKSONVILLE, FL 32210

Current Mailing Address:

4260 HERSCHAL ST
JACKSONVILLE, FL 322110

New Mailing Address:

4260 HERSCHEL ST
JACKSONVILLE, FL 32210

FEI Number: 11-3657158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES A. NOLAN, P.A.
ONE INDEPENDENT DRIVE
2000
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FRITSCHKE, DONNA
Address: 3555 RANDALL ST
City-St-Zip: JACKSONVILLE, FL 32205

Title: DVS () Delete
Name: FRITSCHKE, ERIC
Address: 3555 RANDALL ST
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA FRITSCHKE

DP

04/27/2004

Electronic Signature of Signing Officer or Director

Date