## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 04, 2004 08:00 AM Secretary of State

| 1. Entity Nam                                                                                                                    | MENT # P0200011261<br>THE RUN, INC.                                                                                                                                        | 9                                                    |                                                                 |                                         | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,        |                                                            |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------|------------------------------------------------|------------------------------------------------------------|
| Principal Place of Business 3748 WEST OAKLAND PARK BLVD 3748 WEST OAKLAND PARK LAUDERDALE LAKES, FL 33311 LAUDERDALE LAKES, FL 3 |                                                                                                                                                                            |                                                      |                                                                 |                                         |                                                |                                                            |
|                                                                                                                                  |                                                                                                                                                                            | ·                                                    |                                                                 | 04112004                                | No Chg-P                                       | CR2E034 (10/03)                                            |
|                                                                                                                                  | O NOT WRITE II                                                                                                                                                             | N THIS SPA                                           | CE                                                              | 4. FEI Numb<br>59-376<br>5. Certificate |                                                | Applied For Not Application \$8.75 Additional Fee Required |
| LAUDERE                                                                                                                          | D, BRIAN BT OAKLAND PARK BLVD DALE LAKES, FL 33311  named entity submits this statement for the plants of registered agent                                                 | urpose of changing its registered                    | d office or registere                                           | IN .                                    | NOT W THIS SP                                  | PACE                                                       |
| SIGNATURE.                                                                                                                       | Signature, typed or printed name of registered agent and title                                                                                                             | If applicable (NOTE Register                         | ed Agent signature requi                                        | red when reinstating)                   |                                                | DATE                                                       |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2004 Fee will be \$550.00                                                            |                                                                                                                                                                            | Election Campaign Finar     Trust Fund Contribution. | 9. Election Campaign Financing \$5 Trust Fund Contribution. Add |                                         | 00 May Be U00000155832 U5/05/04-80053-012 150. |                                                            |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                  | OFFICERS AND DIRECT DPS BERNARD, BRAIN 3748 WEST OAKLAND PARK BLVD LAUDERDALE LAKES, FL 33311 DT BERNARD, EVA MARIE 3748 WEST OAKLAND PARK BLVD LAUDERDALE LAKES, FL 33311 | CTORS                                                |                                                                 |                                         |                                                |                                                            |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP                                                                                            | LAODERDALE LARES, FL 33311                                                                                                                                                 | · · · · · · · · · · · · · · · · · · ·                |                                                                 | DO                                      | NOT W                                          | 'RITE                                                      |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)( )), 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 of the corporation or the receiver entrustee employeed 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 perspowered.

SIGNATURE;

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4282/004

954-73/9-500Z

Daytime Phone #