2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000125318

1. Entity Name
ANSWERSTOGO, INC.

Principal Place of Business	Mailing Address
5151 COLLINS AVENUE	5151 COLLINS AVENUE
SUITE 1423	SUITE 1423
MIAMI BEACH, FL 33140-2717	MIAMI BEACH, FL 33140-2717

DO NOT WRITE IN THIS SPACE

02232004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
36-4513903	Not Applicable

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

6. Name and Address of Current Registered Agent

FERGUSON, ROBERT
5151 COLLINS AVENUE
SUITE 1423
MIAMI BEACH, FL 33140-2717

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

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

TITLE	PSD
NAME	FERGUSON, ROBERT
STREET ADDRESS	5151 COLLINS AVENUE SUITE 1423
CITY-ST-ZIP	MIAMI BEACH, FL 331402717

TITLE	
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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: _____   2/24/04   305 866 7720

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #