

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126385

FILED
Apr 29, 2004
Secretary of State

Entity Name: VESTAL CAPITAL MANAGEMENT, INC.

Current Principal Place of Business:

6511 NE 21ST DRIVE
FT LAUDERDALE, FL 33308

New Principal Place of Business:

6499 NORTH POWERLINE ROAD
SUITE 301
FT LAUDERDALE, FL 33309

Current Mailing Address:

6511 NE 21ST DRIVE
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 04-3727215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VESTAL, JASON
6511 NE 21ST DRIVE
FT LAUDERDALE, FL 33308

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: P () Delete
Name: VESTAL, JASON
Address: 6511 NE 21ST DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S () Change (X) Addition
Name: VESTAL, JANET
Address: 6511 NE 21ST DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

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: JASON VESTAL

P

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date