

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129460

Entity Name: FIXOCLOCK, INC.

FILED
Feb 10, 2004
Secretary of State

Current Principal Place of Business:

1145 HOLLOW PINE DR
OVIEDO, FL 32765

New Principal Place of Business:

519 CORNWALL ROAD
WINTER PARK, FL 32792

Current Mailing Address:

1145 HOLLOW PINE DR
OVIEDO, FL 32765

New Mailing Address:

519 CORNWALL ROAD
WINTER PARK, FL 32792

FEI Number: 81-0589308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'BRIEN, EDWARD L
1145 HOLLOW PINE DR
OVIEDO, FL 32765

Name and Address of New Registered Agent:

O'BRIEN, EDWARD L
519 CORNWALL ROAD
WINTER PARK, FL 32792

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:

02/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: O'BRIEN, JANET H
Address: 1145 HOLLOW PINE DR
City-St-Zip: OVIEDO, FL 32765

Title: P () Delete
Name: O'BRIEN, EDWARD L
Address: 1145 HOLLOW PINE DR
City-St-Zip: OVIEDO, FL 32765

Title: S () Delete
Name: O'BRIEN, THOMAS C
Address: 4260 HUNTINGTON CIR
City-St-Zip: ATLANTA, GA 30338

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: O'BRIEN, JANET H
Address: 519 CORNWALL ROAD
City-St-Zip: WINTER PARK, FL 32792

Title: P (X) Change () Addition
Name: O'BRIEN, EDWARD L
Address: 519 CORNWALL ROAD
City-St-Zip: WINTER PARK, FL 32792

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: EDWARD L. O'BRIEN

P

02/10/2004

Electronic Signature of Signing Officer or Director

Date