

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132056

Entity Name: G 3 CORP.

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

P.O. BOX 770099
NAPLES, FL 34107 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 770099
NAPLES, FL 34107 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUY F. MASTERS III
28549 DOUBLOON RD.
LITTLE TORCH KEY, FL 33043 US

Name and Address of New Registered Agent:

MASTERS III, GUY F
3661 WILD PINES DRIVE
306
BONITA SPRINGS, FL 34134 US

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: GUY F. MASTERS III

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MASTERS, GUY F III
Address: PO BOX 431920
City-St-Zip: BIG PINE KEY, FL 33043 US

Title: SEC () Delete
Name: MASTERS, GUY F III
Address: PO BOX 431920
City-St-Zip: BIG LINE KEY, FL 33043 US

Title: TRES () Delete
Name: MASTERS, GUY F III
Address: PO BOX 431920
City-St-Zip: BIG PINE KEY, FL 33043 US

Title: DIR () Delete
Name: MASTERS, GUY F III
Address: PO BOX 431920
City-St-Zip: BIG PINE KEY, FL 33043 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MASTERS, GUY F III
Address: 3661 WILD PINES DRIVE #306
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: SEC (X) Change () Addition
Name: MASTERS, GUY F III
Address: 3661 WILD PINES DRIVE #306
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: TRES (X) Change () Addition
Name: MASTERS, GUY F III
Address: 3661 WILD PINES DRIVE #306
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: DIR (X) Change () Addition
Name: MASTERS, GUY F III
Address: 3661 WILD PINES DRIVE #306
City-St-Zip: BONITA SPRINGS, FL 34134 US

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: GUY F. MASTERS III

P

04/26/2004

Electronic Signature of Signing Officer or Director

Date