2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009113

Entity Name: FANTASY ISLAND GROUP ONE, INC.

FILED Mar 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2365 NW 214 STREET 2365 NE 214 STREET MIAMI, FL 33180 MIAMI, FL 33180

Current Mailing Address: New Mailing Address:

2365 NW 214 STREET 2365 NE 214 STREET MIAMI, FL 33180 MIAMI, FL 33180

FEI Number: 84-1623591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BEKER COPPENS, MARINA
2365 NW 214 STREET
MIAMI, FL 33180

COPPENS, MARINA B
2365 NE 214 STREET
MIAMI, FL 33180

MIAMI, FL 33180

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: MARINA COPPENS 03/06/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PSD () Delete

 Name:
 BEKER COPPENS, MARINA

 Address:
 2365 NW 214 STREET

 City-St-Zip:
 MIAMI, FL 33180

 Title:
 VTD
 () Delete

 Name:
 LUCIEN, RUDY

 Address:
 2365 NW 214 STREET

 City-St-Zip:
 MIAMI, FL 33180

Title: () Delete

Name: Address: City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

Name: COPPENS, MARINA B Address: 2365 NE 214 STREET City-St-Zip: MIAMI, FL 33180

Title: VPD (X) Change () Addition

Name: COPPENS, RUDY L Address: 2365 NE 214 STREET City-St-Zip: MIAMI, FL 33180

Title: SD () Change (X) Addition

Name: BEKER, GALINA

Address: 231-174TH STREET, STE 1614 City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: MARINA COPPENS PRES 03/06/2004