

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Jul 21, 2004 8:00 am**  
**Secretary of State**

07-21-2004 90024 003 \*\*\*550.00

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07012004 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P03000019421</b>					
1. Entity Name <b>GERALD SMITH &amp; ASSOCIATES, INC.</b>					
Principal Place of Business <b>7314 FLORANADA WAY DELRAY BEACH, FL 33446</b>		Mailing Address <b>7314 FLORANADA WAY DELRAY BEACH, FL 33446</b>			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>56-2322561</b>	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>			8.75 Additional Fee Required		
5. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SMITH, GERALD 7314 FLORANADA WAY DELRAY BEACH, FL 33446</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			State <b>FL</b> Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	<b>D</b>	<input type="checkbox"/> Delete	TITLE	<b>DIRECTOR &amp; V.P.</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>SMITH, GERALD</b>		NAME	<b>HAIDER SMITH</b>	
STREET ADDRESS	<b>7314 FLORANADA WAY</b>		STREET ADDRESS	<b>7314 FLORANADA WAY</b>	
CITY-ST-ZIP	<b>DELRAY BEACH, FL 33446</b>		CITY-ST-ZIP	<b>DELRAY BEACH, FL 33446</b>	
TITLE		<input type="checkbox"/> Delete	TITLE	<b>D. Pres &amp; CEO</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	<b>GERALD SMITH</b>	
STREET ADDRESS			STREET ADDRESS	<b>7314 FLORANADA WAY</b>	
CITY-ST-ZIP			CITY-ST-ZIP	<b>DELRAY BEACH, FL 33446</b>	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <i>Gerald Smith</i>		GERALD SMITH, CEO		7/19/04 5616378113	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	