2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020915

FILED Apr 26, 2004 Secretary of State

Entity Name: 7-OUT INC. **Current Principal Place of Business: New Principal Place of Business:** 1801 S OCEAN DRIVE APT 541 HALLANDALE, FL 33009 **Current Mailing Address: New Mailing Address:** 1801 S OCEAN DRIVE APT 541 HALLANDALE, FL 33009 FEI Number: 43-1998909 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: KRAFT, SHARON ABC BÓOKKEEPING SERVICE 4435 SW 26TH AVENUE FT LAUDERDALE, FL 33312 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MOLLICA, JOHN Name: Name: 1801 S OCEAN DRIVE APT 541 Address: Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: MOLLICA, THOMAS Name: 1801 S OCEAN DRIVE APT 541 Address: Address: HALLANDALE, FL 33009 City-St-Zip: 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: JOHN MOLLICA **PRES** 04/26/2004