## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Apr 29, 2004 8:00 am Secretary of State **DOCUMENT # P03000022143** 04-29-2004 90335 049 \*\*\*150.00 G & G ENTERPRISES OF MANATEE, INC. Principal Place of Business Mailing Address 5008A 21ST ST W 5008A 21ST ST W BRADENTON, FL 34207 BRADENTON, FL 34207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03152004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 25-1904130 Not Applicable Zip. Country \$8.75 Additional 5.-Certificate of Status Desired ------6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHNSON, GREG Street Address (P.O. Box Number is Not Acceptable) 5008A 21ST ST W BRADENTON, FL 34207 City 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 Signature, typed of printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition TITLE □ Delete TITLE HARKINS, GLENDA NAME NAME 5008A 21ST ST W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34207 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition JOHNSON, GREG NAME NAME STREET ADDRESS 5008A 21ST ST W STREET ADDRESS BRADENTON, FL 34207 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition SEE, JOHN JR NAME NAME 5008A 21ST ST W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34207 CITY-ST-ZIP □ Delete TITLE ☐ Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP's TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 attaching it with an address, with all other like empowered.

**FILED**