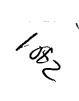
2004 FOR PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # P03000027511					FILED			
4 CHRIST INC.					04 OCT -5 AM ID: 51			
Principal Place	a of Business	Mailing Address	OO WE TH					
P.O.BOX 8883		P.O.BOX 8883	P.O.BOX 8883		SECRETA	Jrtu, 51A SSEE, FLOR	TE NOA	
-JACKSONVILL	.E;Ft-32239	JACKSONVILLE, FL-3	2239	-100		;;;-i-l		
2. Principal P	lace of Business	3. Mailing Address						
					HEN 1161 BAYN NUML BUN 187110	1191; (900) 1110) 1160) fil	######################################	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		08222004 Chg-P CR2E034 (10/03)			
City & State		City & State	City & State)689074		oplied For ot Applicable	
Zip	Country	Zip	Country	3. Certificate of		\$8.75 Add	ditional	
	6. Name and Address of Curre	nt Registered Agent			ddress of New Regist	Fee Require	d	
LIBRI VILL	NAARVINI ID		Name		3,,,,			
1182 WES	D, MARVIN JR. ST 13TH STREET		Street Addr	Street Address (P.O. Box Number is		-		
JACKSON	VILLE, FL 32209							
			City	City FL Zip Code			e	
	named entity submits this statement	for the purpose of changing	its registered office or re	gistered agent, or both	in the State of Florida.	I am familiar with,	and accept	
the obligat	tions of registered agent.							
SIGNATURE	Signature, typed or printed name of registered ago	ent and title if applicable. (N	OTE: Registered Agent signature r	required when rainstating)		DATE		
CII CII	LE NOW!!! FEE IS \$150.00	9. Election Cam	paign Financing	\$5.00 May Be	In accordance with s	607 193(2\/h)	ES the	
	ue by September 8, 2004 October 1 200	Trust Fund Co		Added to Fees	corporation did not n	eceive the prior	notice.	
10.	OFFICERS AN	D DIRECTORS	11.	ADDITIONS/C	HANGES TO OFFICERS	***************************************		
TITLE Name	P KIRKLAND, MARVIN JR.	LAND, MARVIN JR.			0004156 70401033	Change	☐ Addition	
STREET ADORESS CITY-ST-ZIP	P.O.BOX 8883 STREET ADDRE			10/04	1/0401033	-004 **15	50.00	
TITLE	JACKSONVILLE, FL 32239 VP	Delete	TITLE			Change	Addition	
NAME	KIRKLAND, TORI P	NAME			—			
STREET ADDRESS CITY-ST-ZIP	P.O.BOX 8883 JACKSONVILLE, FL 32239		STREET ADDRESS CITY-ST-ZIP				İ	
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	····				
TITLE NAME		Delete	TITLE NAME			Change	Addition	
STREET ADDRESS			STREET ADDRESS					
TITLE		☐ Delete	CITY-ST-ZIP TITLE			☐ Change	Addition	
NAME		L deidle	NAME.			C/ailigo		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		Delete	TIFLE			☐ Change	Addition	
NAME STREET ADDRESS	The second secon	——————————————————————————————————————	STREET ADDRESS	ے ہے۔				
CITY-ST-ZIP			CITY-ST-ZIP					
12. I hereby indicated	certify that the information supplied was don this report or supplemental repor reporation or the receiver or trustee en	with this filing does not qualify	for the exemption stated at my signature shall have	l in Section 119.07(3)(i), e the same legal effect or 607. Florida Station	Florida Statutes. I furth as if made under oath;	er certify that the in that I am an officer	nformation or director	
changed	rporation or the receiver or trustee en I, or on an attachment with an addres	s, with all other like empowers	on as required by Chapti ed.	ei oor, fiorida statutes;	ано шасту пате арр	n deres il i diOCK 10 0	DIOCK 11 II	
SIGNAT	rure: _ Hrs low	Kinkland			10-01-04	1,25-	LLOO	
	SIGNATURE AND TYPED C	OR PRINTED NAME OF SIGNING OFFIC	ER OR DIRECTOR	· · · · · · · · · · · · · · · · · · ·	Date	Daytime Phone #		

2007

To the Division of Corporations,

The Annual Report notice for the Entity 4 Christ Inc. has not been received. Enclosed is a cashiers' check for 150.00 and the Annual Report form. Please send all correspondence to 7318 Sandy Bluff Dr. Jacksonville,

FI-32277.

Thank You, Mr. Marvin Kirkland President