2004 FOR PROFIT CORPORATION ANNUAL REPORT

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Principal Place	e of Business	Mailing Address		T ra	1222HA 1 1	E. FLORIDA	
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_∓ ,337	Country	233431	Couply	5. Certificate	of Status Desired	S8.75 Ad Fee Require	
	6. Name and Address of Current I	Registered Agent	7	7. Name and	Address of New	Registered Agent	
WOODS L	WIF I		Name				
430 NC 2011(3)			Street Address	ss (P.O. Box Number is Not Acceptable)			
#113 BOCA RATON, FL 33431							
BOCK TOTTON, FE 33401			City			FL Zip Coo	de
\$ The above	named entity submits this statement for	the nursoss of changing its n	egistered office or regist	tered agent, or hol	h in the State of F		and accept
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	Signor: wpcrf or privided name of registered agost a	nditte Engaschold. (NGTE)	Registored Agon signal Jie regu	red when reastaing)		DATE	
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12. I hereby certify that the information supplied with this filing does not quality 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 yignature shall have the same legal effect as it made under oath: that I am an officer or of the corporation or the receiver or trustee embowered 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 embowered.

SIGNATURE: _

MONATURE AND TYPED OR PRINTED NAME OF SKINNING OFFICER OF DESECTOR

4-30-04

561-271-6000 cp

Daytime Phone II