2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044624

Entity Name: TAKE CHANCES AT THE HELM INC.

FILED Aug 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

211 SKIFF POINT

APT. E

CLEARWATER, FL 33767 US

New Mailing Address: Current Mailing Address:

211 SKIFF POINT

APT. E

CLEARWATER, FL 33767 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEGALZOOM NEVADA INC SHORT, BARBARA 44 W. FLAGLER ST. 211 SKIFF POINT SUITE 675 APT E

MIAMI, FL 33130 US CLEARWATER, FL 33767 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: BARBARA SHORT 08/19/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete () Change () Addition

SHORT, BARBARA Name: Name: 211 SKIFF POINT, APT. E Address: Address: City-St-Zip: CLEARWATER, FL 33767 US City-St-Zip:

Title: Title: TREA () Delete () Change () Addition

Name: SHORT, BARBARA Name: 211 SKIFF POINT, APT. E Address: Address: CLEARWATER, FL 33767 US City-St-Zip: City-St-Zip:

Title: Title: SECY () Delete () Change () Addition

SHORT, BARBARA Name: Name: 211 SKIFF POINT, APT, E Address: Address: City-St-Zip: CLEARWATER, FL 33767 US 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: BARBARA SHORT **PRES** 08/19/2004