

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051199

FILED  
May 26, 2004  
Secretary of State

**Entity Name:** ACT ENTERPRISES INTERNATIONAL, INC.

**Current Principal Place of Business:**

2200 LUCIEN WAY SUITE 195  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

2200 LUCIEN WAY SUITE 195  
MAITLAND, FL 32751

**New Mailing Address:**

**FEI Number:** 65-1186030

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SHEALY, DONNA  
2200 LUCIEN WAY SUITE 195  
MAITLAND, FL 32751

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

NRAI SERVICES, INC.  
526 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: MARY PARIS, ASSISTANT SECRETARY

05/26/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D/P ( ) Change (X) Addition  
Name: SHEALY, JOHN  
Address: 1701 THE GREEN WAY #725  
City-St-Zip: JACKSONVILLE BEACH, FL US

Title: DVPT ( ) Change (X) Addition  
Name: WYNIA, BRUCE  
Address: 276 SNOWFIELDS RUN  
City-St-Zip: HEATHROW, FL

Title: D/S ( ) Change (X) Addition  
Name: SHEALY, DONNA  
Address: 349 BRANTLEY CLUB PL  
City-St-Zip: LONGWOOD, FL 32779 US

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 SHEALY

DP

05/26/2004

Electronic Signature of Signing Officer or Director

Date