2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# P03000053824

Entity Name: PLEXI-CHEMIE, INC.

Current Principal Place of Business:

1930 SAN MARCO BOULEVARD., SUITE 201
ST. MARK'S PLACE
JACKSONVILLE, FL 32207

New Principal Place of Business:

3529 ENTERPRISE WAY
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

1930 SAN MARCO BOULEVARD., SUITE 201
ST. MARK'S PLACE
JACKSONVILLE, FL 32207

New Mailing Address:

3529 ENTERPRISE WAY
GREEN COVE SPRINGS, FL 32043

FEI Number: 54-2127095 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEPRELL, SAMUEL L
1930 SAN MARCO BOULEVARD., SUITE 201
ST. MARK'S PLACE
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

LEPRELL, SAMUEL L
1930 SAN MARCO BLVD.
SUITE 201 ST. MARK'S PLACE
JACKSONVILLE, FL 32207 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: SAMUEL L. LEPRELL 07/01/2004
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:

Title: D ( ) Delete
Name: SICILIA, PAT
Address: 1930 SAN MARCO BOULEVARD., SUITE 201
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change ( ) Addition
Name: SICILIA, PAT
Address: 3529 ENTERPRISE WAY
City-St-Zip: JACKSONVILLE, FL 32043

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: PAT SICILIA P 07/01/2004
Electronic Signature of Signing Officer or Director Date