2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004
Secretary of State

DOCUMENT# P03000061099

Entity Name: TRUE TEAM, INC.

Current Principal Place of Business:

1282 SUMMIT OAKS DRIVE W
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

1282 SUMMIT OAKS DRIVE W
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 04-3762076 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUXENBERG, STEVEN
1282 SUMMIT OAKS DRIVE W
JACKSONVILLE, FL 32221

Name and Address of New Registered Agent:

LUXENBERG, STEVEN B
1282 SUMMIT OAKS DRIVE W
JACKSONVILLE, FL 32221

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: STEVEN B. LUXENBERG 05/03/2004
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: PD ( ) Delete
Name: LUXENBERG, STEVEN
Address: 1282 SUMMIT OAKS DRIVE W
City-St-Zip: JACKSONVILLE, FL 32221

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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: LUXENBERG, JULIE L
Address: 1282 SUMMIT OAKS DR. WEST
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP ( ) Change (X) Addition
Name: LUXENBERG, DANIEL
Address: 1282 SUMMIT OAKS DR. WEST
City-St-Zip: JACKSONVILLE, FL

Title: VP ( ) Change (X) Addition
Name: LUXENBERG, ALISHA D
Address: 1282 SUMMIT OAKS DR. WEST
City-St-Zip: JACKSONVILLE, FL 32221

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: JULIE L LUXENBERG VP 05/03/2004
Electronic Signature of Signing Officer or Director Date