

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075444

FILED  
Jun 30, 2004  
Secretary of State

Entity Name: MAYS UNIVERSE INC.

**Current Principal Place of Business:**

118 LAS BRISAS CIRCLE  
HYPOLUXO, FL 33462

**New Principal Place of Business:**

**Current Mailing Address:**

118 LAS BRISAS CIRCLE  
HYPOLUXO, FL 33462

**New Mailing Address:**

377 W. MALLORY CIRCLE  
DELRAY BEACH, FL 33483

FEI Number: 20-0092588

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATE CREATIONS NETWORK INC  
11380 PROSPERITY FARMS RD #221E  
PALM BEACH GARDENS, FL 33410 US

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

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: \_\_\_\_\_

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: GONZALEZ, PETER D  
Address: 118 LAS BRISAS CIRCLE  
City-St-Zip: HYPOLUXO, FL 33462

Title: D ( ) Delete  
Name: GONZALEZ, MAIGUALIDA M  
Address: 118 LAS BRISAS CIRCLE  
City-St-Zip: HYPOLUXO, FL 33462

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

Title: D (X) Change ( ) Addition  
Name: GONZALEZ, PETER D  
Address: 377 W. MALLORY CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D (X) Change ( ) Addition  
Name: GONZALEZ, MAIGUALIDA M  
Address: 377 W. MALLORY CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33483

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: PETER GONZALEZ

VP

06/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date