

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077393

FILED  
Apr 22, 2004  
Secretary of State

Entity Name: START IT UP, INC.

## Current Principal Place of Business:

PO BOX 4071  
WEST PALM BEACH, FL 33402 US

## New Principal Place of Business:

PO BOX 2582  
PALM BEACH, FL 33480 US

## Current Mailing Address:

PO BOX 4071  
WEST PALM BEACH, FL 33402 US

## New Mailing Address:

PO BOX 2582  
PALM BEACH, FL 33480 US

FEI Number: 42-1599299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GLASS, TIMOTHY G  
222 AUSTRALIAN AVENUE  
#5  
PALM BEACH, FL 33480 US

## Name and Address of New Registered Agent:

GLASS, TIMOTHY G  
2151 WEST HILLSBORO BLVD.  
SUITE 300  
DEERFIELD BEACH, FL 33442 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: TIMOTHY G. GLASS

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST ( ) Change (X) Addition  
Name: GLASS, TIMOTHY G  
Address: P.O. BOX 2582  
City-St-Zip: PALM BEACH, FL 33480

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: TIMOTHY G. GLASS

PST

04/22/2004

Electronic Signature of Signing Officer or Director

Date