## 2004 FOR PROFIT CORPORATIONS ANNUAL REPORT

## FILED May 12, 2004 8:00 am Secretary of State 04-22-2004 90030 007 \*\*\*150.00

FRAMEW	MENT # P0300008 DRKS, INC.	32272		04-22-2004 90030 007 *****150.00	
Principal Place of Business Mailing Address 900 FOX VALLEY DR STE 203 900 FOX VALLEY DR STE 201 LONGWOOD, FL 32779 LONGWOOD, FL 32779				TO CUCUSAN COPACION OF THE CO	
A)4	es que las	<u></u>		- INTERES IN ATTACAMENT AND	
	ace of Business	3. Mailing Address		I IRBANESI DI BASIR ININ BENI BAND BONDO TANIB HALIS 1989 HASIS USTESAT TI IBBI	
Suite, Apt. #, etc.		Suite, Apl. #, etc.		01082004 Chg-P CR2E034 (10/03)	
City & State		City & State		4. FEI Number 4/0/83 Applied For Not Applied For	
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Curr	ent Registered Agent	Name	7. Name and Address of New Registered Agent	
	I, CHARLES R /ILLION AVE		Street Acc	Street Address (P.O. Box Number is Not Acceptable)	
WINTER PARK, FL 32789					
			City	FL Zip Code egistered egent, or both, in the State of Florida. I am familiar with, and accept	
ilo inil		9. Election Camp Trust Fund Co	ntribution.	\$5.00 May Be Added to Fees  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME *** STREET ADDRESS ** CITY-SI-DP	D. C., A. M. LESLIE, MATTHEW J 900 FOX VALLEY DR STE 20 LONGWOOD, FL 32779	6 }, ( ≩ : .) □ 0elete ( .) ,	NAME STREET ADDRESS CITY-ST-ZIP	485 Chickee Court Lake Mary FL 32746	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Celete	TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		C Deleta	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
_TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	YITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	THILE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
			ort as required by Chap ed.	od in Section 119.07(3)(i), Florida Statutes. I further certify that the information we the same legal effect as if made under eath; that I am an officer or director oter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if	
SIGNATURE: MATTHEW J LESUE) 4/19/04 (407) 328-4034					