


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000089740					
1. Entity Name CENTER STATE FIBERGLASS, INC.					
Principal Place of Business 1120-FIFTH STREET SW WINTER HAVEN, FL 33880			Mailing Address 1120-FIFTH STREET SW WINTER HAVEN, FL 33880		
2. Principal Place of Business 5597 COMMERCIAL BOULEVARD Suite, Apt. #, etc.		3. Mailing Address 5597 COMMERCIAL BOULEVARD Suite, Apt. #, etc.		06182004 Chg-P CR2E034 (10/03)	
City & State Winter Haven, FL		City & State Winter Haven, FL		4. FEI Number 56-2392048	
Zip 33880		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MILLER, BOBBY R 1120-FIFTH STREET SW WINTER HAVEN, FL 33880			7. Name and Address of New Registered Agent Name: MILLER, BOBBY R. Street Address (P.O. Box Number is Not Acceptable): 5597 COMMERCIAL BOULEVARD City: Winter Haven, FL Zip Code: 33880		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Bobby Miller</i> DATE: 6/21/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE: D NAME: MILLER, BOBBY R STREET ADDRESS: 1566 LAKE HOWARD DRIVE CITY-ST-ZIP: WINTER HAVEN, FL 33880	<input type="checkbox"/> Delete		TITLE: D NAME: MILLER, JILL A. STREET ADDRESS: 1566 Lake Howard Drive CITY-ST-ZIP: Winter Haven, FL 33880	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Bobby Miller (president)</i> DATE: 6/21/04					

AFFIDAVIT OF NON-RECEIPT

STATE OF FLORIDA
COUNTY OF POLK

Before me, the undersigned notary public, personally appeared BOBBY R. MILLER, who is personally known to me (____) or who provided the following identification (____), who after being duly sworn, deposes and says:

1. I make this affidavit upon personal knowledge. I am a director and the president of CENTER STATE FIBERGLASS, INC., for which the articles of incorporation were filed with the Division of Corporations on 8/31/03.

2. My wife, Jill A. Miller, is also a director of the corporation, however, I am the person who is at the business address and runs the day to day operations of the business.

3. The business received its mail at 1120 Fifth Street SW, Winter Haven, FL 33880 until a recent move approximately one month ago. The business has a forwarding address registered with the U.S. Post Office currently and receives forwarded mail.

4. As the person who receives mail to CENTER STATE FIBERGLASS, INC., I can certify and swear the CENTER STATE FIBERGLASS, INC., never received a notice to file annual report from the Florida Department of State, Division of Corporations.

5. I am making this affidavit as a prerequisite for waiver of the \$400.00 penalty for late filing of the corporation's 2004 For Profit Corporation Annual Report.

FURTHER AFFIANT SAYETH NAUGHT.

Bobby R. Miller
BOBBY R. MILLER

Sworn to and subscribed this 25th day
of June, 2004.

Name: [Signature]

Notary Public

Commission No. _____

My commission expires: _____



ALLAN L. CASEY
DANIEL P. ROONEY

Law Offices
ALLAN L. CASEY
P.O. Box 7146
Winter Haven, Florida 33883-7146
863-294-4468
FAX 863-294-3947

395 Avenue C, N.W.
Winter Haven, Florida 33881

June 21, 2004

Corporate Records Bureau
Division of Corporations
Department of State
P. O. Box 6327
Tallahassee, FL 32301

Re: Center State Fiberglass, Inc.

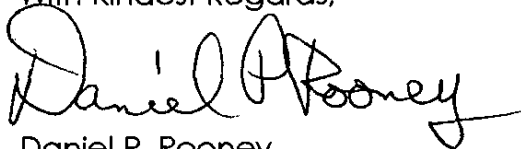
Gentlemen:

Enclosed herewith in connection with the above referenced matter, please find the following concerning the above referenced corporation:

- a. 2004 Annual Return (with a change of registered office);
- b. The corporation's affidavit of non-receipt of notice to file annual report with a request for waiver of the penalty for late filing; and
- c. The corporation's check in an amount of \$185.00 for filing of the annual report and the change of registered office.

If you have any questions concerning any of this, please contact me. Thanking you in advance for your assistance, I am,

With Kindest Regards,


Daniel P. Rooney

cc Center State Fiberglass, Inc.,