

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091906

FILED
Apr 30, 2004
Secretary of State

Entity Name: ALCHEMY UNLIMITED INC.

Current Principal Place of Business:

2804 MONROE ST.
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

2804 MONROE ST.
STUART, FL 34997

New Mailing Address:

FEI Number: 42-1602894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSCARELLA, KATHY A
5752 SW MISTLETOE LANE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

MUSCARELLA, CRISTENZO J
5752 SW MISTLETOE LANE
PALM CITY, FL 34990 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: CRISTENZO J. MUSCARELLA

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MUSCARELLA, KATHY A
Address: 5752 SW MISTLETOE LANE
City-St-Zip: PALM CITY, FL 34990

Title: VDS () Delete
Name: MUSCARELLA, CRISTENZO J
Address: 5752 SW MISTLETOE LANE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VDS (X) Change () Addition
Name: MUSCARELLA, KATHY A
Address: 5752 SW MISTLETOE LANE
City-St-Zip: PALM CITY, FL 34990

Title: PD (X) Change () Addition
Name: MUSCARELLA, CRISTENZO J
Address: 5752 SW MISTLETOE LANE
City-St-Zip: PALM CITY, FL 34990

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: CRISTENZO J. MUSCARELLA

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date