## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 22, 2004 8:00 am Secretary of State 05-06-2004 90169 027 \*\*\*150.00

DOCUI 1. Entity Nam STANDAR	ю .	# P0300009 vts, INC.	9204								
Principal Place of Business			Mailing Address			66428815					
931 VILLAGE BLVD. SUITE 905-165			931 VILLAGE BLVD. SUITE 905-165				00420013				
WEST PALM I	BEACH, FL	33409	West Palm Beach, F	L 33409	•	1 180 111 00 11	13151 Juh etik ondi 111	e. <b>ata</b> nia (dista inc	10 1131  \$610 6161	111: SI 1811	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. W, etc.			Suite, Apt. #, etc.		02042004	Chg-P	CR2E0	34 (10/03)			
City & State			City & State			4. FEI Numb	1 <u>2</u> 7019			plied For LApplicable	
Zip	Country		Zip Coun		ntry	5. Certificate of Status Desired S8.75 Additional Fee Regulard				itional	
	6. Name	and Address of Currer	nt Registered Agent				7. Name and Address of New Registered Agent				
	ARLAKE O RALIAN A		· -•	Street Address	(P.O. Box Numb	er is Not Acceptable	a) FL	Zip Code			
The above named entity submits this statement for the purpose of changing its regi					ed office or registe	red agent or bo	th, in the State of Ek		lamiliar with	and accept	
the obligations of registered agent.											
SIGNATURE  Signature, syorid or printed name of registered agent and tide if applicable. (NOTE: Registered Agent organizer required when rengisting) , DATE											
Sognishura, granu or paragraph or registration against or registration and other importance in processing against an according to the processing against a processing											
FILE NOWIII FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees											
10.	V	OFFICERS AN		11.		ADDITIONS	CHANGES TO OFF	<u></u>	DIRECTORS	SIN <sub>i</sub> t1 <sub>U-1</sub>	
TITLE ~	BROUILLETTE, PETER			TIL					Change 1	Addition	
STREET ADDRESS 1701 VILLAGE BLVD #111				EET ADORESS							
CTTY-ST-ZIP	WEST PA	ALM BEACH, FL 3340			r-ST-ZIP	••••	<del></del>	<del></del>	F7 04		
NAME			☐ Delete	IITL NAV				ė	Change	Addition	
STREET ADDRESS	ĺ				EET ADDRESS						
CITY-ST-ZIP			☐ Delete	III	r-SI-ZIP	<del></del>			Change	☐ Addition	
TEAME	ļ			RAN	1				C. Oranie		
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS r-St-zip						
- mrr			☐ Delete	TITE					Change	Addition	
NAME	-	· · ·		RAN		- , <del></del>		<del></del>			
STREET ADDRESS CITY-ST-ZIF					ELT ADDRESS 1-ST-ZIP						
FITLE		· · · · · · · · · · · · · · · · · · ·	☐ Delete	ΠTL	E				☐ Change	Addition	
NAME STREET ADDRESS				NAX.	AE EET ADDRESS						
CITY-ST-ZIP	}		•	•	Y-ST-AP						
TITLE	:		☐ Delete	tire	1				☐ Change	☐ Addition	
STREET ADDRESS	i ii			NAM STR	re . Eet address						
CITY-ST-ZIP		- · · · · · · · · · · · · · · · · · · ·		CITY	r-ST-ZIP				1706	15.4 99	
12. I hereby certify that the information supplied with this filling 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.											
The same that the state of the same that the											
SIGNATURE: 2501 688 0105											