

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 8:00 am
Secretary of State

07-23-2004 90001 012 ***150.00

DOCUMENT # P03000104511

1. Entity Name
 EXHIBITION SERVICES INC.



Principal Place of Business
 418 SOUTH CONGRESS AVENUE
 WEST PALM BEACH, FL 33406

Mailing Address
 418 SOUTH CONGRESS AVENUE
 WEST PALM BEACH, FL 33406

54064489



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07012004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number

14-189 8816

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUSINESS FILINGS INCORPORATED
 660 EAST JEFFERSON STREET
 TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Charles Doerr
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/30/04

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME DOERR, CHARLES
 STREET ADDRESS 418 SOUTH CONGRESS AVENUE
 CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Charles Doerr
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/30/04



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 13, 2004

EXHIBITION SERVICES INC.
418 SOUTH CONGRESS AVENUE
WEST PALM BEACH, FL 33406

SUBJECT: EXHIBITION SERVICES INC.
Ref. Number: P03000104511

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800)829-1040. *ok*

Please attach letter requesting fee abatement.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott
Document Specialist

Letter Number: 904A00044531

Copy

MEMO

CMA - Corporate Marketing of America

418 South Congress Avenue West Palm Beach, FL 33406-3022

Ph. (561) 471-1471 Fx. (561) 471-1479 Cell. (561) 436-5036

email: sdoerr@cma-outsourcing.com

~~Date: Thursday, July 01, 2004~~

To:

Division Of Corporations
PO BOX 6198
Tallahassee, FL 32314-6198
850-245-6056 Fax:

From: Charles Doerr,

Phone: 561-471-1471 Fax: 561-471-1479

Cell: 561-371-8345 E-Mail: sdoerr@cma-outsourcing.com

Subject: Dear Sir,

My two corporations have not received any notice for renewal. This notice attached is the first notice we received and we thought it was a bogus notice. We have use to receiving the standard long form each year. We were not notified of the new-form Or procedure you are using now. Please find enclosed check for two corporations. PS I could not find the box on the form indicating that we did not receive any notice!

Regards

Charles Doerr

President

F/cma inc. & Exhibition Services Inc.