

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107710

FILED
Mar 28, 2004
Secretary of State

Entity Name: SEITER ENTERPRISES, INC.

Current Principal Place of Business:

P.O. BOX 3116
HOLIDAY, FL 34690

New Principal Place of Business:

2410 SUCCESS DRIVE
2
ODESSA, FL 33556

Current Mailing Address:

P.O. BOX 3116
HOLIDAY, FL 34690

New Mailing Address:

FEI Number: 20-0285511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEITER, BRIAN
7804 GRAND BLVD.
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEITER, BRIAN
Address: P.O. BOX 3116
City-St-Zip: HOLIDAY, FL 34690

Title: D () Delete
Name: SEITER, KRISTY
Address: P.O. BOX 3116
City-St-Zip: HOLIDAY, FL 34690

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/D (X) Change () Addition
Name: SEITER, BRIAN
Address: P.O. BOX 3116
City-St-Zip: HOLIDAY, FL 34690

Title: P/D (X) Change () Addition
Name: SEITER, KRISTY
Address: P.O. BOX 3116
City-St-Zip: HOLIDAY, FL 34690

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: BRIAN SEITER

S/D

03/28/2004

Electronic Signature of Signing Officer or Director

_____ Date