2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2004
Secretary of State

DOCUMENT# P03000120858

Entity Name: TNK PUMPING, INC.

Current Principal Place of Business:

811 APRICOT DR.
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

811 APRICOT DR.
OCOEE, FL 34761

New Mailing Address:

FEI Number: 20-0349891 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEER, FL 32301 US

Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301 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: _____ 01/05/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WALDING, KATI
Address: 811 APRICOT DR.
City-St-Zip: OCOEE, FL 34761

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PRES ( ) Change (X) Addition
Name: WALDING, KATI J
Address: 811 APRICOT DR.
City-St-Zip: OCOEE, FL 34761

Title: VP ( ) Change (X) Addition
Name: WALDING, TROY A
Address: 811 APRICOT DR.
City-St-Zip: OCOEE, FL 34761

Title: S ( ) Change (X) Addition
Name: FULLER, WILLIE J
Address: 811 APRICOT DR.
City-St-Zip: OCOEE, FL 34761

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: KATI WALDING DIR 01/05/2004
Electronic Signature of Signing Officer or Director — Date