

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130151

Entity Name: FORTUNES, INC.

FILED
May 13, 2004
Secretary of State

Current Principal Place of Business:

3852 FOXCROFT ROAD, STE 212
MIRAMAR, FL 33025

New Principal Place of Business:

8730 NORTH SHERMAN CIRCLE
BLDG 2, #105
MIRAMAR, FL 33025 US

Current Mailing Address:

3852 FOXCROFT ROAD, STE 212
MIRAMAR, FL 33025

New Mailing Address:

8730 NORTH SHERMAN CIRCLE
BLDG 2, #105
MIRAMAR, FL 33025 US

FEI Number: 01-0802532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: SHEARWOOD, NIGEL
Address: 3852 FOXCROFT ROAD, STE 212
City-St-Zip: MIRAMAR, FL 33025

Title: DVPT () Delete
Name: PHIPPS, LARSON
Address: 3852 FOXCROFT ROAD, STE 212
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: SHEARWOOD, NIGEL
Address: 3252 FOXCROFT ROAD, STE 212
City-St-Zip: MIRAMAR, FL 33025

Title: DVPT (X) Change () Addition
Name: PHIPPS, LARSON
Address: 3252 FOXCROFT ROAD, STE 212
City-St-Zip: MIRAMAR, FL 33025

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: NIGEL SHEARWOOD

DPS

05/13/2004

Electronic Signature of Signing Officer or Director

Date