2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 30, 2004 8:00 am Secretary of State **DOCUMENT # P03000137637** 04-30-2004 90389 011 ***150.00 BARRY BILT, INC. Mailing Address Principal Place of Business 1209 CHRISTOBEL STREET 1209 CHRISTOBEL STREET DAYTONA BEACH, FL 32117 DAYTONA BEACH, FL 32117 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03052004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 58-2677630 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SMITH, MARVIN Street Address (P.O. Box Number is Not Acceptable) 1209 CHRISTOBEL STREET DAYTONA BEACH, FL 32117 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150,00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE Change Addition MARVIN SMITH PLET NAME NAME 1209 CHRISTODEL STREET STREET ADDRESS STREET ADDRESS DAYTONA BEACH, FL 32117 CITY - ST - ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defere TITLE Change --- FinAddition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 arrivan 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 either like empowered.

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(394) 257-6433

1269 CHRISTOBEL ST. DAYTONA BEACH, FL. 32117