


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P38364 1. Entity Name FOX SYSTEMS, INC.	
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Principal Place of Business 4110 N. SCOTTSDALE ROAD STE. 345 SCOTTSDALE, AZ 85251-3920	Mailing Address 4110 N. SCOTTSDALE ROAD STE. 345 SCOTTSDALE, AZ 85251-3920
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DO NOT WRITE IN THIS SPACE
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01062004 No Chg-P CR2E034 (10/03)

4. FEI Number 68-0121468	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent  CT CORPORATION SYSTEM C/ CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000121343 04/20/04-80048-007 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CPT FOX, SUSAN 1961 E. SECRETARIAT TEMPE, AZ 85283
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SHISHIDA, MARK K 9073 E. GRAY ROAD SCOTTSDALE, AZ 85260
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D AHUJA, DESH 5956 E. SWEETWATER SCOTTSDALE, AZ 85254
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LARKIN, WILLIAM F 14388 E. GERONIMO ROAD SCOTTSDALE, AZ 85259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE
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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:**  **1-15-04**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #