

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 07, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P92000006548</b>		
1. Entity Name <b>AZURE ENGINEERING, INC.</b>		
Principal Place of Business <b>127 SE 35TH ST KEYSTONE HEIGHTS, FL 32656 US</b>		Mailing Address <b>127 SE 35TH ST KEYSTONE HEIGHTS, FL 32656 US</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
		07012004 No Chg-P CR2E034 (10/03)
		4. FEI Number <b>65-0371427</b>
		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Name and Address of Current Registered Agent		
<b>VAN ZANT, KATHERINE LYNN 127 SE 35TH ST KEYSTONE HEIGHTS, FL 32656</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 relocating) DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <b>VAN ZANT, KATHERINE LYNN 127 SE 35TH ST KEYSTONE HEIGHTS, FL</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
<b>DO NOT WRITE IN THIS SPACE</b>		
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: <u>Katherine Van Zant</u> <u>Katherine Van Zant</u>		Date <u>7/1/04</u> Daytime Phone # <u>352 473-9011</u>