## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 03, 2004 08:00 AN Secretary of State

1. Entity Nan	MENT # P92000010	347			Secretary of State
	ce of Business SEWOOD AVENUE TONA, FL	Mailing Address 2739S RIDGÉWOOD AVENUE SOUTH DAYTONA, FL 32119	US		
L	OO NOT WRITE  6. Name and Address of Current R		CE	04152004 4. FEI Numb 59~315	
	GARY W ER BAEACH AVE A BCH, FL 32118		DO NOT WRITE IN THIS SPACE		
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  Signature, typed or printed name of registered agent and title if applicable. [NOTE Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees					
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D  D ZAVAKOS, CLINTON 2739 S RIDGEWOOD AVE SOUTH DAYTONA, FL	RECTORS			U00000150140 05/03/04-80215-001 150.00
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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: X TAX X 4/2 C/C4 X SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Data Osymme Phone #					