2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004
Secretary of State

DOCUMENT# P92000014825

Entity Name: MICHELE FISCHETTI ENTERPRISES, INC.

Current Principal Place of Business:

4563 44TH STREET SOUTH
ST. PETERSBURG, FL 33711 US

New Principal Place of Business:

Current Mailing Address:

4563 44TH STREET SOUTH
ST. PETERSBURG, FL 33711 US

New Mailing Address:

FEI Number: 59-3158523 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISCHETTI, MICHELE
4563 44TH STREET SOUTH
ST. PETERSBURG, FL 33711 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: FISCHETTI, MICHELE
Address: 4563 44 ST SOUTH
City-St-Zip: ST PETERSBURG, FL 33711

Title: D ( ) Delete
Name: FISCHETTI, MICHELE
Address: 4563 44 ST SOUTH
City-St-Zip: ST PETERSBURG, FL 33711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: FISCHETTI, MICHELE
Address: 4563 44 STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33711

Title: VPSD (X) Change ( ) Addition
Name: FISCHETTI, ANNA
Address: 4563 44 STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33711

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: MICHELE FISCHETTI PTD 04/20/2004

Electronic Signature of Signing Officer or Director Date