2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000005870

FILED May 10, 2004 8:00 am Secretary of State

05-10-2004 90456 030 ***150.00

DOLLAR POWER, INC.						
Principal Place of Business 2400 S. RIDGEWOOD AVE. SUITE 18 S. DAYTONA, FL 32119		Mailing Address 111 WOOD IBIS CT. DAYTONA BEACH, FL 32119				
2. Principal Place of Business		3. Mailing Address 2400 S. PINEEWOOD AVE		ve		
Suite, Apt.	TE 50	Suite, Apt. #, etc.		04202004 Chg-P	CR2E034 (10/03)	
City & State	9	City & State 5. AAYTONA	F.C.	4. FEI Number 59-3164736	Applied Fo	
Zip	Country	33119 L	Country JSA	5. Certificate of Status Desired	Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
111 WOOE	B, CATHERINE R D IBIS COURT BEACH, FL 32119		Street Address (P.O. Box Number is Not Acceptable) 1057 TORCHWOOD DR City DeLAND FL 39734			
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 act the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and talle 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.	OFFICERS AND I		11.		FFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SCHWAAB, CATHERINE R 111 WOOD IBIS COURT DAYTONA BEACH, FL 32119	Delete :	NAME STREET ADDRESS	PRESIDENT SARY TESSERO 1052 TORCHWOOD A DRLAND, FC 33		
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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 directly 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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