2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

ANNUAL REPORT (AR)						FILED		
DOCUMENT # P93000026928 1. Entity Name						Mar 04, 2004 08:00 AM Secretary of State		
MB-3D, II	NC.					Section	ctary or	State
Principal Place of Business Mailing Address					-			
7281 AMER DELRAY 88 US	RLY LANE, 1 EACH FL 33	03 446	7281 AMERLY LANE, 103 DELRAY BEACH FL 33446 US			 		(\$ \$1\$\$)
2. Principal F	**	ness	3. Mailing Address					
Suite, Apt			Suite, Apt #, etc			MOORE	CR2E034 (11/0)3)
City & State			City & State			4. FEI Number 65-040216	5	Applied For Not Applicable
Ζιρ	Country		Zip	Country		5. Certificate of Status Desired		5 Additionalequired
Name and Address of Current Registered Agent					Name	7. Name and Address of New I	Registered Agent	
SCH	ENNETH Y LANE, 103				P.O. Box Number is Not Acceptable	e)		
DEL	RAY BEA	ACH FL 33446					-	-
					City		FL Zi	p Code
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 talls if applicable. (NOTE, Registered Agent signature required when reinstance) DATE FILE NOW!!! FEE IS \$150.00								
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing Trust Fund Contribution. Added to Fees								
10.	it i dyddie it	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFF	TCERS AND DIRE	CTORS (N) 11
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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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daylor Progres **								
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