2004 FOR PROFIT CORPORATION

FILED Feb 11, 2004 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P93000045624** 1. Entity Name PUNCH CLOCK, INC. Mailing Address Principal Place of Business 733 MIDDLE RIVER DR. 1655 E. OAKLAND PARK BLVD. FT. LAUDERDALE, FL 33334 FORT LAUDERDALE, FL 33304 02082004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FE) Number Applied For Not Applicable 65-0423289 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHESS, KAREN DO NOT WRITE 733 MIDDLE RIVER DR. FORT LAUDERDALE, FL 33304 IN THIS SPACE THE RESERVE OF THE PARTY OF THE 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. adsoliges a sitt bas frega be etages (NOTE Registered Agent signature required when reinstating) DATE. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. U00000045771 TITLE 02/11/04-80076-022 150.00 CHESS, KAREN NAME STREET ADDRESS 773 MIDDLE RIVER DR. CITY-ST-ZIP FORT LAUDERDALE, FL 33304 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS TITLE HAME STREET ADDRESS CITY - ST - ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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.

STREET ADDRESS CITY-ST-ZIP

INTED NAME OF SIGNING OFFICER OR DIRECTOR