2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P93000045696 1. Entity Name HI-TECH INDUSTRIES, INC.						Tetaly of S	naic
Principal Place of Business 736 WESLEY AVE TARPON SPRINGS, FL 34689 US Mailing Address PO BOX 1592 TARPON SPRINGS, FL 34688					100 January 100 Ja		
	•		<u>-</u> -				
D	O NOT WRITE I	CE	04292004 4. FEI Numb	No Chg-P	CR2E034 (10/03)	lied For	
_			59-3021226 5. Certificate of Status Desired				
	6. Name and Address of Current Regi	stered Agent		_		Fee Required	
719 WESL TARPON :	ON, MARYELLEN LEY AVENUE SPRINGS, FL 34689	DO NOT WRITE IN THIS SPACE					
	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	ed office or register	ed agent, or bo	th, in the State of Flo	ride. I am familiar with, ar	rd accept
SIGNATURE	Signature, typed or profied name of registered agent and title	o il applicable. (NOTE. Registere	1 Agent signature required	when reinstating)	<u>. </u>	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				00 May Be ed to Fees			
10.	OFFICERS AND DIRE	CTORS		_			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JOHNSTON, MARYELLEN 1806 KENILWORTH STREET HOLIDAY, FL 34691				U00000 05/04/04-	151754 80057-015 150,	, OO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSTON, LARRY 1806 KENILWORTH ST HOLIDAY, FL 34691						
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO	NOT W	RITE	T TO PROGRAMME TO THE P
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							ray/demonstrated in the parameter of the
TITLE NAME STREET ADDRESS CITY-ST-ZIP							To Controller
indicated	certify that the information supplied with this on this report or supplemental report is true	and accurate and that my signat	ure shall have the s	ame legal effec	t as if made under c	ath: that I am an officer or	director