

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Mar 22, 2004 08:00 AM**  
**Secretary of State**

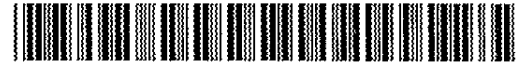
DOCUMENT # P95000052684

1. Entity Name  
VIABLE ALTERNATIVES, INC.



Principal Place of Business  
3900 CLARK RD.  
SUITE F1  
SARASOTA, FL 34233 US

Mailing Address  
3900 CLARK RD.  
SUITE F1  
SARASOTA, FL 34233 US



02202004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0438084 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOYER, EDWIN M  
46 N. WASHINGTON BLVD  
SUITE 21  
SARASOTA, FL 34236

**DO NOT WRITE  
IN THIS SPACE**

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 title 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  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ALKIRE, VICKI V
STREET ADDRESS	3900 CLARK RD STE F-1
CITY-ST-ZIP	SARASOTA, FL 34233
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000094198  
03/22/04-80050-007 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:  Vicki V. Alkire  Date:  3-17-04  Devtime Photos #  941-921-1962