2004 FOR PROFIT CORPORATION ANNUAL REPORT					FILED Mar 12, 2004 08:00 AM Secretary of State			
DOCUMENT # P93 I. Enlity Name CHRIS G. MCEWAN, P.A.		Secretary of State						
rincipal Place of Business 6400 PINE ISLAND ROAD 80KEELIA, FL 33922	540 Sui	Mailing Address 5400 PINE ISLAND RD SUITE B BOKEELIA, FL 33922 US						
6. Name and Address of Current Registered Agent				Image: No Chg-P CR2E034 (10/03)   4. FEI Number Applied For   65-0503854 Not Applicable   5. Certificate of Status Desired \$8.75 Additional   Fee Required Fee Required				
6, Name and Addre ICEWAN, CHRIS G P.A. 400 PINE ISLAND ROAD OKEELIA, FL 33922	<u>ss of Current Register</u>	red Agent			NOT WR HIS SPA			
The above named entity submits if the obligations of registered agent. IGNATURE	of registered agent and like it as		red Agent signature required	مى ئىلىتىتى <u>تۇرە مىرى</u>	n, in the State of Florida	- DATE	· · ·	
D. C   ILE D   MME MCEWAN, CHRIS (   INT-ST-ZIP S400 PINE (SLAND   IV-ST-ZIP BOKEELIA, FL 335   TILE MME   MPELT ADDRESS FIFLET ADDRESS	ROAD	ORS			•			
TLE AME IRRET ADDRESS ITY-SI-ZIP TLE AME IRRET ADDRESS ITY-SI-ZIP			_		NOT WF THIS SP/			
ITLE AME TREET ADDRESS ITY - ST - ZIP TLE AME TREET ADDRESS								
CITY-ST-ZIP 12. I hereby certify that the informatic indicated on this report or supple of the corporation or the receiver changed, or on an attachment with SIGNATURE:	mental report is true an opposite empowered i than address, with all o	d accurate and that my sign o execute this report as required.	lature shall have the uired by Chapter 60	same legal elfec 17, Florida Statute	t as if made under oalt	n: that I <b>am an ol</b> ficer	or director Block 11 if	