

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000087936

FILED
Apr 28, 2004
Secretary of State

Entity Name: NORTH FLORIDA ELECTROLYSIS CENTER, INC.

Current Principal Place of Business:

1794 ROGERO RD
STE 1001
JACKSONVILLE, FL 32211 US

New Principal Place of Business:

1785 ROGERO RD
JACKSONVILLE, FL 32211 US

Current Mailing Address:

1794 ROGERO RD
STE 1001
JACKSONVILLE, FL 32211 US

New Mailing Address:

1785 ROGERO RD
JACKSONVILLE, FL 32211 US

FEI Number: 59-3279228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAY, REBECCA
1794 ROGERO ROAD
STE 1001
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

RAY, REBECCA
1785 ROGERO ROAD
JACKSONVILLE, FL 32211 US

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.

SIGNATURE:

04/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAY, REBECCA
Address: 1794 ROGERO ROAD #1001
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAY, REBECCA
Address: 1785 ROGERO ROAD
City-St-Zip: JACKSONVILLE, FL 32211

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REBECCA RAY

P

04/28/2004

Electronic Signature of Signing Officer or Director

Date