2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # P95000002055** 1. Entity Name PERSISTENCE PLUS, INC. Principal Place of Business Mailing Address 910 E HERON CIR 910 E HERON CIR WINTER HAVEN, FL 33884 WINTER HAVEN, FL 33884 01262004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3292349 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ASPACHER, HARLEY DO NOT WRITE 910 E HERON CIR WINTER HAVEN, FL 33884 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. (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000122434 Trust Fund Contribution. Added to Fees 04/21/04-80028-019 150.00 OFFICERS AND DIRECTORS 10. PDST TITLE ASPACHER, HARLEY NAME STREET ADDRESS 910 E HERON CIR WINTER HAVEN, FL CITY - ST- ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS C3TY - S7 - Z3P

12. (hereby certify that the information supplied with this filling 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 eath; 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Continue Monte of Proper Harack

4-17-04 Date 863 324-7456 Daytime Phone *

FILED

Apr 21, 2004 08:00 AM