2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 17, 2004 8:00 am Secretary of State DÖCUMENT # P95000014744 02-17-2004 90064 001 ***150.00 02-17-2004 90064 002 *****8.75 GEORGE W. FIKA, INC. Mailing Address Principal Place of Business 2050 40th Ave. Ste. 3 2050 40TH AVE STE 3 VERO BEACH, FL. 32960 Vero Beach, FL 32960-2467 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02132004 Chg-P QR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0563127 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name O'DONAL, MARCIA RICHARD L. PRENDERGAST, INC. Street Address 2050 40TH AVE STE 3 120-43RD AVENUE VERO BEACH, FL 32960 VERO BEACH FL 32968 Zip Code City 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 prin Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution, Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE ☐ Defete TITLE ☐ Change NAME -FIKA, GEORGE W NAME STREET &ODRESS 2050 40TH AVE STE 3 STREET ADDRESS CITY-ST-7IP VERO BEACH, FL 32960 CITY-ST-ZIP TITLE 🛬 TITLE ☐ Change ☐ Addition NAME O'DONAL, MARCIA NAME 2050 40TH AVE STE 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL 32960 Detete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete ☐ Change ■ Addition TITLE TITLE MARAE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

NTED NAME OF SIGNING OFFICER OR DIRECTOR

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For	FLORIDA DEPT. OF STATE DIVISION OF CORPORATIONS P. O. BOX 1500 TALLAHASSEE, FL 32302-1500	GEORGE W FIKA, INC. 2050 40TH AVE -SUITE 3 VERO BEACH, FL 32960	Sta
Description	· .	-	Statement of Account
Ref Charges	Date 02/13/2004	Account No. 0006267800	ccount
Credits	· · · · · · · · · · · · · · · · · · ·	Page #	