SIGNATURE:

Jul 19, 2004 08:00 AM.
Secretary of State ANNUAL REPORT DOCUMENT # P95000034232 MR. G'S HOUSE OF 2,000 FLAVORS, INC. Principal Place of Business Mailing Address 1000 5THST. 1000 5THST. FT. MMEFG FL 33931 FT. MMERS, RL 33931 (P95000034232P) 06082004 No Cha-P CR2F034 (10/03) DO NOT WRITE IN THIS SPALL-4. FEI Number Applied For 65-0578158 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CITROLA, RICHARD DO NOT WRITE 1000 5TH ST FT. MYERS, FL 33931 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signalure required when minstalling) DATE 9 Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May 8e Trust Fund Contribution. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS TITLE CITROLA, RICHARD NAME H00000Ü167174 STREET ADDRESS 1000 5TH ST . 97/19/04-80014-005 550.00 FT. MYERS, FL: 33931 City-ST-ZiP THILE MARKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS City-ST-ZIP TOLE STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS 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