

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000043342

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: FPM ENTERPRISES II, INC.

## Current Principal Place of Business:

906 E. PARK ST.  
PARKER, FL 32404 US

## New Principal Place of Business:

## Current Mailing Address:

633 SOUTH TYNDALL PARKWAY  
PANAMA CITY, FL 32404

## New Mailing Address:

FEI Number: 59-3319533

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORIN, JAMES E  
633 S. TYNDALL PKWY.  
PANAMA CITY, FL 32404 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SAKUGAWA, JON I  
Address: 2122 SHAMROCK LANE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: D ( ) Delete  
Name: AMISON, CHONG H  
Address: 633 S. TYNDALL PKWY.  
City-St-Zip: PANAMA CITY, FL 32404

Title: STVD ( ) Delete  
Name: MORN, JAMES E  
Address: 633 S. TYNDALL PKWY.  
City-St-Zip: PANAMA CITY, FL 32404

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MORIN, JAMES E.

STVD

04/28/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date