## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Mar 12, 2004 08:00 AM **DOCUMENT # P95000072919** Secretary of State 1. Entity Name **ENTRESS CORPORATION** Principal Place of Business Mailing Address 5200 NORTH OCEAN DRIVE 5200 NORTH OCEAN DRIVE SINGER ISLAND, FL 33404 SINGER ISLAND, FL 33404 03072004 No Cho-P CB2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0615276 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent STREIT, THOMAS E DO NOT WRITE 7787 SOUTH FLAGLER DR. SUITE 900 IN THIS SPACE W PALM BEACH, FL 33401 3. 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 printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ENTRESS, TR 5200 NORTH OCEAN DR. STREET ADDRESS CITY-ST-ZIP SINGER ISLAND, FL 33404 U00000086293 03/12/04-80016-021 150.00 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 his 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 time empowered.

**FILED**