2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # P95000097988 1. Hilly Name ARIEL J. DORRA, P.A. Apr 19, 2004 08:00 AM Secretary of State Principal Place of Business Mailing Address 612 OCEAN DUNE CIRCLE 612 OCEAN DUNE CIRCLE JUPITER, FL 33477 JUPITER, FL 33477 04102004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0637652 Not Applicab': \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DORRA, ARIEL J DO NOT WRITE 612 OCEAN DUNES CIR JUPITER, FL 33477 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) DATE 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 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DORRA, ARIEL J NAME 900000119752 04/19/04-80112-006 1**50.00** 612 OCEAN DUNE CIRCLE STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33477 TITL F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing docenet 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 at other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY - ST-ZIP

MIT MM