2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 15, 2004 08:00 AM DOCUMENT # P96000033291 **Secretary of State** 1. Entity Name STATION 441, INC. Principal Place of Business Mailing Address 2 S ORANGE BLOSSOM TRAIL 2 S ORANGE BLOSSOM TRAIL ORLANDO, FL 32805 ORLANDO, FL 32805 02112004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3386537 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROSHANALI, RAMZAN DO NOT WRITE 2 S ORANGE BLOSSOM TRAIL ORLANDO, FL 32805 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, typed or printed name of redistered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U000000089079 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 33/15/04-80076-022 150.03 OFFICERS AND DIRECTORS 10. PD TITLE NAME ROSHANALI, RAMZAN 25 ORANGE BLOSSOM TE STREET ADDRESS CHY-ST-ZIP ORLANDO, FL 32805 THLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-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 region of the region of

SIGNATURE:

NAME STREET ADDRESS CITY - ST - ZIP

Daytime Phone #