2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P96000037679

1. Entity Name
AFRICA SAFARIS INC.

Principal Place of Business	Mailing Address
2629 N FEDERAL HWY FT. LAUDERDALE, FL 33306	2629 N FEDERAL HWY FT. LAUDERDALE, FL 33306

DO NOT WRITE IN THIS SPACE

04262004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0664231	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PRYCE, ROY
2621 N. FEDERAL HIGHWAY
FT. LAUDERDALE, FL 33306

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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 _____ ROY POXEE _____ (NOTE, Registered Agent signature required when reinstating)   APR 24 '04

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

II00000135273
04/28/04-80051-023 150.00

10.	OFFICERS AND DIRECTORS
TITLE	P
NAME	PRYCE, ROY
STREET ADDRESS	841 NW 47TH STREET
CITY-ST-ZIP	POMPANO BEACH, FL 33064
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Roy Pry. _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 24 04   8665656(954)
Date   Daytime Phone #