
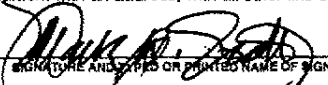


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000038768		
1. Entity Name WEBBCO, INC.		
Principal Place of Business 6531 43RD STREET NORTH #1606 PINELLAS PARK, FL 33781 US		Mailing Address 6531 43RD STREET NORTH #1606 PINELLAS PARK, FL 33781 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SCOTT, MARK 6531 43RD ST NORTH #1606 PINELLAS PARK, FL 33781		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D JOHNSON, JEFF 250 BOVGAINVILLEA ST. TAVERNIER, FL 33070	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D RYAN, ERIC PO BOX 89 NEW YORK, NY 10024	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DVT SCOTT, MARK 5320 39TH AVENUE NORTH SAINT PETERSBURG, FL 33709	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PS REVERE, AVERY 10 CAPE COD LN. BARNSTABLE, MA 02830	
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 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:  MARK K. SCOTT <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



04292004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0672434	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U00000153520
05/04/04-80129-016 150.00

**DO NOT WRITE
IN THIS SPACE**

4/29/04 727-528-4611
Daytime Phone #