## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

CUTY-ST-ZIP

## FILED Feb 09, 2004 08:00 AM Secretary of State

Gaylane Phone #

DOCUMENT # P96000046780  I. Critis Name I. Critis Name II. Critis Name III. Critis Name IIII. Critis Name III. Critis Name II		ANNUAL	KEPUKI		Corretary of Ctata
Principal Place of Business 3700 MR800K (TY BLV).  PO. BOX 2414 MELBOURNE, FL 32935  DO NOT WRITE IN THIS SPACE    P.O. BOX 2414   MELBOURNE, FL 32935   P.O. BOX 2414   MELBOURNE, FL 32935   P.O. BOX 2414   MELBOURNE, FL 32935   MELSON, JESSE 3700 NORTH HARBOR CITY BLVD. SUITE 2-B   P.O. BOX 2414   P.O. BOX 2414   MELBOURNE, FL 32935   DO NOT WRITE IN THIS SPACE   IN THIS SPACE    P.O. BOX 2414   P.O. B			780		Secretary of State
STOP LINES OF THE LEGISTRY BLVD. SUITE 2-B   MELBOURNE, FL 32935					
DO NOT WRITE IN THIS SPACE    A FEI Number   Sp. 3380   159   Not Chg.P   CR2E034 (10'03)	3700 HAR		P.O. BOX 2414	-	
DO NOT WRITE IN THIS SPACE  4. FEI Number 59-3380159	MELBOURN	JE, FL 32935		·	
A FEI Number 59-3380159 Applied for 59-3380159 S. Certificate of Status Desired S. St. 75 Additional Rose Required  6. Name and Address of Current Registered Agent  NELSON, JESSE 3700 NORTH HARBOR CITY BLVD, SUITE 2-B MELBOURNE, FL 32935  THIS above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FILE NOWILL FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  OFFICERS AND DIRECTORS  THE  NAME  NELSON, JESSE  3700 NORTH HARBOR CITY BLVD. SUITE 2-B  NAME  NELSON, JESSE  3700 NORTH HARBOR CITY BLVD. SUITE 2-B  NAME  NELSON, JESSE  10, OFFICERS AND DIRECTORS  THE  NAME  NAME  SIREL ANGRESS  CITY 51-2P  THE  SIREL ANGRESS  CITY 51-2P  THE  SIREL ANGRESS  THE  SIRE					
6. Name and Address of Current Registered Agent  NELSON, JESSE 3700 NORTH HARBOR CITY BLVD, SUITE 2-B  NELBOURNE, FL 32935  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the familiar with, and accept the familiar with, and accept the familiar with accept the familiar with and accept the familiar with accept the familiar with accept the familiar with accept the familiar with and accept the familiar with accept the familiar with accept the familiar with accept the familiar with accept the familiar wi	DO NOT WRITE IN THIS SPA			ÇE	4. FEI Number Applied For
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RELSON, JESSE 3700 NORTH HARBOR CITY BLVD, SUITE 2-B  B. The above ramed entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Specime, typed or private same of registered agent with a 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  Specime, typed or private same of registered agent with a 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  SIGNATURE  SIGNATURE  SPELE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  S. Election Campaign Financing Trust Fund Contribution.  S. 5.00 May Be Added to Fees  100, OFFICERS AND DIRECTORS  NELSON, JESSE SIRRI ARDRESS SIRRI ARDRESS OITY-51-2P  TITLE NAME SIRRI ARDRESS OITY-51-2P  DO NOT WRITE INT THIS SPACE  DO NOT WRITE INT THIS SPACE  TITLE NAME SIRRI ARDRESS OITY-51-2P  TITLE NA	<del> </del>	6. Name and Address of Current F	ALL CONTRACTOR OF THE PROPERTY		
SIGNATURE  Separate A product or projected agent.  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   Added to Fees   \$5.00 May Be Added to Fees	3700 NORTH HARBOR CITY BLVD, SUITE 2-B				•
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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 if 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.

LESSE TLEESON.
SIGNATURE AND TWEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR