## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 29, 2004 8:00 am Secretary of State DOCUMENT # P96000073931 04-29-2004 90280 033 \*\*\*150.00 SEPARADYNE ENERGY PRODUCTS, INC. Principal Place of Business Mailing Address 5680 - 66 STREET NORTH 5680 - 66 STREET NORTH 14011468 ST. PETERSBURG, FL 33709 ST, PETERSBURG, FL 33709 US US 2. Principal Place of Business 2035 Dodge St 2035 Podos Suite, Apt. #, etc. 04262004 CR2E034 (10/03) Chg-P Applied For City & State 4. FFI Number leauwato Cleshwa 59-3399687 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GRAYSON, KENT N 2035 DODGE STREET CLEARWATER, FL. 34020 33760 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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition Grayson, Kent N 2035 Dodge 8+ Clearwater, FL 33760 GRAYSON, KENT N NAME NAME STREET ADDRESS 2035 DODGE ST STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 34620 CITY-ST-ZIP X Delete Change TITLE TITLE Addition CERDA, JESUS NAME NAME STREET ADDRESS 9407 122 AVENUE NORTH STREET ADDRESS CITY-ST-ZIP LARGO, FL 33773 CITY-ST-ZIP **La** Change Delete TITLE ☐ Addition GLAYSON, Kent N 2035 Dodge St Cleanwater, FL 33760 CERDA, MARCIA NAME NAME STREET ADDRESS 9407 122 AVENUE NORTH STREET ADDRESS CITY-ST-ZIP LARGO, FL 33773 CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CtTY-ST-ZIP ☐ Addition JITLE ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-ST-712 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 empewered 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 without affairess, with all other like empowered. SIGNATURE: SIGNATURE RINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**