## . 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 29, 2004 08:00 AM Secretary of State

DOCUMENT # P96000079914  1. Entity Name STRICTLY THE BEST, INC.							·
Principal Plac 6031-A MIR/ MIRAMAR, FI	AMAR PARKWAY	Mailing Address 6031-A MIRAMAR PARKWAY MIRAMAR, FL 33023					
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				1 18835 441 22	No Chg-P	m#101	accenacy para
	O NOT WRITE	CE	04122004 4. FEI Number	er -	CR2E034 (10/	Applied For	
				65-083	of Status Desired	□ \$8.75	Not Applicable Additional
	6. Name and Address of Current Re	gistered Agent	]	3. Certificate	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	Fee Re	quired
STEPHENSON, ANDREA 6031-A MIRAMAR PARKWAY MIRAMAR, FL 33023  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  Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  OATE							
	<u> </u>	ncina \$5	5.00 May Be	ugogoc	140949		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.				ded to Fees	U4/29/U4-	-80182-009	150.00
10.	- OFFICERS AND DI	RECTORS					
NAME STREET ADDRESS CITY-SI-ZIP	D STEPHENSON, ANDREA 6031-A MIRAMAR PARKWAY MIRAMAR, FL 33023						
IDLE NAME STREET ADDRESS CITY-ST-ZIP							Laps processors and the second
THEE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
MILE NAME STREET ADDRESS CHY-ST-ZIP				IN T	THIS SF	ACE	
HILE NAME STRLEI ABDRESS CVIY-51-XIP						<u> </u>	a manufactura manu
THEE NAME STREET ADDRESS CHY-ST-ZIP				· · · · · · · · · · · · · · · · · · ·			; •· <del>-</del> - <u>-</u>
12. I hereby indicated of the corchanged	certify that the information supplied with the lonthis report or supplemental report is trupperation or the receiver or trustee empower, or on an attachment with an address part with an address part with an address part or on an attachment or	is filing does not qualify for the exe re and accurate and that my signa ared to execute this report as requi a all other like empowered.	mption stated in S ture shell have the red by Chapter 60	Section 119.07(3) same legal effec 7, Florida Statute	(i), Florida Statutes, I of as if made under o es; and that my name	further certify that eath; that I am an o appears in Block	the information flicer or director 10 or Block 11 if