2004 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Mar 30, 2004 08:00 AM **DOCUMENT # P96000095487 Secretary of State** SIGN LANGUAGE SERVICES, INC. _ Mailing Address Principal Place of Business 1523 MAYPOP FOAD 1523 MAYPOP FOAD WEST PALMEEACH FL 33415 WEST PALMEEACH, FL 33415 03152004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0717196 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSON, TERRY M DO NOT WRITE 1523 MAYPOP ROAD WEST PALM BEACH, FL 33415 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. (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000099283 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 03/30/04-80008-008 150.00 10. OFFICERS AND DIRECTORS PD TITLE JOHNSON, TERRY M NAME 1523 MAYPOP RD STREET ADDRESS WEST PALM BEACH, FL CITY-\$7-ZIP TITLE NAME. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling 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, Aith all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP