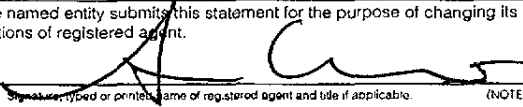
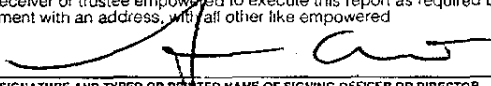


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000020844		
1. Entity Name MEGALODON, INC.		
Principal Place of Business 9447 COVENTRY LAKE COURT WEST PALM BEACH, FL 33411 US		Mailing Address 9447 COVENTRY LAKE COURT WEST PALM BEACH, FL 33411 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ALTEN, STEVEN R 9447 COVENTRY LAKE COURT WEST PALM BEACH, FL 33411		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  DATE <u>3/4/04</u> (NOTE: Registered Agent signature required when reinstating)		
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
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U000000155784 05/05/04-80051-012 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALTEN, STEVEN R 9447 COVENTRY LAKE COURT WEST PALM BEACH, FL 33411	
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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 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>4/23/04</u> <u>561-798-0844</u> Date Daytime Phone #