2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 03, 2004 08:00 AM Secretary of State **DOCUMENT # P97000035579** 1. Entity Name HONORABLE REPORTING, INC. Principal Place of Business Mailing Address 3962 N.W. 1ST DR 3962 N.W. 1ST DR DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442 02272004 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 65-0758028 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HODGE, SHARON 3962 N.W. 1ST DR DEERFIELD BEACH, FL 33442 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, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE U00000074467 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 03/03/04-80020-017 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME HODGE, SHARON STREET ADDRESS 3962 N.W. 1ST DR CITY-ST-ZIP DEERFIELD BEACH, FL 33442 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 received 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 all other like empowered.

FILED