## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000068135

Entity Name: NAVARRO AND MAGGART, INC

FILED Jan 15, 2004 Secretary of State

Entity Na	Me: NAVARE	O AND MAGGART, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	PITER LANDIN FD 33458	IGS DRIVE		
Current Mailing Address:			New Mailing Address:	
	PITER LANDIN FD 33458	IGS DRIVE		
FEI Number	: 65-0772549	FEI Number Applied For()	FEI Number Not Applicab	ole ( ) Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Ad	dress of New Registered Agent:
	PITER LANDIN	IGS DRIVE US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its re	egistered office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	NAVARRO, JO	R LANDINGS DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VPFO ( MAGGART, JE 1301 PARRAK STUART, FL 3	EET LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	LEWIS NAVAR	R LANDINGS DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VP ( ANDEL, ELLEI 471 N. JUNO L JUNO BEACH,	ANE	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address:	(	) Delete		C ( ) Change (X) Addition ERHARTZ, CHARLES D 34 SW 29TH STREET

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip: PALM CITY, FL 34990

SIGNATURE: JOSE A. NAVARRO PRES 01/15/2004

City-St-Zip: