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Maria McKay

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90176 047 ***158.75

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000075859 1. Entity Name EFFECTIVE PRODUCTS INC.	
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Principal Place of Business 2501 BUSCH BLVD #3 TAMPA, FL 33612 7	Mailing Address 2501 BUSCH BLVD #3 TAMPA, FL 33612 7
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94069304



DO NOT WRITE IN THIS SPACE

03232004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3493133	Applied For ☒ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent CHRISTY, MARK A 2501 W BUSCH BLVD TAMPA, FL 33618 6RISTY #7	DO NOT WRITE IN THIS SPACE
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9. 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 releasing)

4-23/04
DATE

**FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRISTY, MARK A 2501 W BUSCH BLVD TAMPA, FL 33618
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(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 lines empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

4/24/04
Date Daytime Phone #