2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2004 08:00 AM Secretary of State DOCUMENT # P97000086993 1. Entity Name MAGGIE MORTON, P.A. Principal Place of Business Mailing Address 1047-92ND STREET 1047-92ND STREET BAY HARBOR, FL 33154 BAY HARBOR, FL 33154 No Chg-P CR2E034 (10/03) 04232004 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0794837 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORTON, MAGGIE DO NOT WRITE 1047-92ND STREET BAY HARBOR, FL 33154 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. Signature, typed or printed name of registered agent and title if applicable, (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE MORTON, MAGGIE U00000130905 04/26/04-80136-020 150.00 STREET ADDRESS 1047-92ND STREET BAY HARBOR, FL 33154 CITY-ST-ZIP TITLE 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 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)(1), 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 in changed, or on an attachment with an address, with all other like empowered.

CITY-\$T-ZIP TITLE NAME STREET ADDRESS

SIGNATURE:

FILED