2004 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT				May 03, 2004 08:00 A			
1. Entity Nar	MENT # P970000870	304			Sec	retary o	of State
Principal Plac 800 W DELE TAMPA, FL		Mailing Address P. O. BOX 31 TAMPA, FL 33601-0031 US					
DO NOT WRITE IN THIS SPACE			CE	02022004 4. FEI Numb 65-078		CR2E034 (10	Applied For Not Applicable Additional
6. Name and Address of Current Registered Agent ROUSSELLE, JR. J 800 W DELEON ST TAMPA, FL 33606			DO NOT WRITE IN THIS SPACE				
the obliga SIGNATURE.	e named entity submits this statement for totons of registered agent. Signature, typed or printed name of registered agent and E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	d Agent signature required			DATE 152661 80095-013		
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D D ROUSSELLE, JR. J 800 W DELEON ST TAMPA, FL 33606	BECTORS			NOT W	—	

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR