2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 21, 2004 8:00 am Secretary of State

1. Entity Nam BEARDO		+10		06	5-21-2004 90	001 049 ***:	150.00
Principal Place of Business 1114 W. COUNTY LINE RD. LUTZ, FL 33558 US Mailing Address 1114 W. COUNTY LINE RD. LUTZ, FL 33558 US				54058052			
2. Principal F 110 Suite, Apt.	Place of Business Isabelle Ann Way #, etc.	3. Mailing Address 11410 Tsoke Suite, Apt. #, etc.	lle Ann Wou	7 03132003 Cho		2E034 (10/03)	
City & Stat	EC. 33749	City & State	tz. F/	4. FEI Number		Ap	plied For
3354	9 Hills borough	u 33549	Hirls how	59-3485149 5. Certificate of Status	Desired	\$8.75 Add	
	6. Name and Address of Current Re	egistered Agent	Name	7. Name and Address	of New Registe	red Agent	
				Address (P.O. Box Number is Not Acceptable)			
LUTZ, FL		1.+. P.					
(14)	10 Isabelle Ann Wa	y with res	3540 City			FL Zip Code	e
8. The above the obligat	named entity submits this statement for t tions of registered agent.	he purpose of changing its	registered office or regist	tered agent, or both, in the	State of Florida. I	am familiar with,	and accept
SIGNATURE			11773 11773 1				
	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE	: Registered Agent signature requir	red when reinstaling)"	DA	ATE .	
\$ b	LE NOW!!! FEE IS \$150.00 ue by September 8, 2004	9. Election Campai Trust Fund Conti			ordance with s. ation did not re		
	OFFICERS AND D	IRECTORS	11	ADDITIONS/CHANGE	S TO OFFICERS	AND DIRECTORS	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	KÖZLOWSKI, R HATA-GOUNTY-LINE RD 17416 LUTZ-EL 33549 LUTZ-FL 33549 LUTZ-FL 33549	□ Delete DIsobelle Aun L 33549	TITLE NAME 2000 ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KOZLOWSKI, BEATA 1114 COUNTY-LINE RD 741 0. LUTZ, FL 33540 LUTZ F	☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-SI-ZIP			Change	- □ Additions
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
		☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	÷.	,	NAME STREET ADDRESS CITY-ST-ZIP			vgc	

Altachment

54054052

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 18, 2004

BEARDOF INC. 1114 W. COUNTY LINE RD. LUTZ, FL 33558 US

SUBJECT: BEARDOF INC. Ref. Number: P97000094415

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Both the annual report/uniform business report and the filing fee must be received by our office together in order to be processed.

Please return the corrected documents to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Gary Blankenbaker Document Specialist

Letter Number: 704A00034782