2004 FOR PROFIT CORPORATION -ANNUAL REPORT

DOCUMENT # P97000098027 04 MAY 20 AM 8: 39 COMMERCIAL APPLIANCE, INC. SEUNE JARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 9361 HAMMAN AVE 9361 HAMMAN AVE 80001 015 PENSACOLA, FL 32514 PENSACOLA, FL 32514 CR2E034 (10/03) 03102004 No Cho-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3487362 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION.SERVICE:COMPANY_ DO-NOT-WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE NAME DYAL, KATHERINE A 9507 SANDPIPER STREET STREET ADDRESS CITY-ST-ZP PENSACOLA, FL 32514 TILLE DYAL, WILLIAM D NAME 9507 SANDPIPER STREET STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32514 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN-THIS-SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 Daytime Phone #

FILED