2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010959

FILED
Feb 22, 2004
Secretary of State

Entity Name: NXT INTERNATIONAL, INC.

Current Principal Place of Business:

12290 TREELINE AVE
STE 200
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

12290 TREELINE AVE
STE 200
FORT MYERS, FL 33913

New Mailing Address:

FEI Number: 59-3503763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITLEY, STEVEN R
2075 WEST FIRST ST. STE 300
FT MEYERS, FL 33902 US

Name and Address of New Registered Agent:

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.

SIGNATURE: ______________________________
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DCS	( ) Delete
Name:	BECKER, KEN B	
Address:	7340 SMOKE RANCH RD STE D	
City-St-Zip:	LAS VEGAS, NV 89128	

Title:	PS	( ) Delete
Name:	PERRY, WALTER L	
Address:	1325 A. INDUSTRIAL DR	
City-St-Zip:	ITASCA, IL 60143	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALTER L. PERRY PS 02/22/2004
Electronic Signature of Signing Officer or Director Date