


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 22, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000013914  
 1. Entity Name  
 PERFORMANCE PC'S, INC.



Principal Place of Business 2235 SOUTH BABCOCK ST MELBOURNE, FL 32901 US	Mailing Address P.O. BOX 100208 PALM BAY, FL 32910-0208 US
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**DO NOT WRITE IN THIS SPACE**



03082004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3497019	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 BARON, HENRY W  
 325 LAKE VIEW LN  
 PALM BAY, FL 32909

**DO NOT WRITE 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: Henry Baron DATE: 4-19-04  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARON, HENRY W 325 LAKE VIEW LN PALM BAY, FL 32909
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BARON, HENRY W 325 LAKE VIEW LANE PALM BAY, FL 32909
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U00000125001  
 04/22/04-80057-012 150.00  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Henry Baron DATE: 4-19-04 DAYTIME PHONE #: 321-725-9969  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR