2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 26, 2004 08:00 AM

DOCUMENT # P88000023200 1. Entity Name				Secretary of State	е
	O NOT WRITE II		CE	02062004 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For S9-3498365 Not Applied 5. Certificate of Status Desired S8.75 Additional Fee Required	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145			DO NOT WRITE IN THIS SPACE		
the obligat	Signature, typed or printed name of registered agent and title E NOWILL FEE IS \$150.00		od Agent stanature required	stered agent, or both, in the State of Florida. I am familiar with, and accompany DATE DATE S5.00 May Be utded to Fees	ept
10. THE MAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP THE STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PSTD MARKS, CHARLES J 1068 KINGS ROAD NEPTUNE BEACH, FL 32266 V MARTIN, SCOTT 1068 KINGS ROAD NEPTUNE BEACH, FL 32266			U00000128372 04/25/04-80034-017 150.00	
TITLE NAME STREET ADDRESS CRY-ST-ZIP DILE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		i i je			
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:					