## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 18, 2004 08:00 AM Secretary of State

Daytime Phone \*

		<b>-</b> , <b>-</b> , -, -, -, -, -, -, -, -, -, -, -, -, -,		3	Secretary	of State
1. Entity Name	MENT # P9800002563 CRETE, INC.	9			300200023	V- 2000
1145 LIVE 0	ak avenue 1	aiting Address 145 LIVE OAK AVENUE AYTONA BEACH, FŁ 32114		of L. I. Springer to the control of		
			- · · · · · · · · · · · · · · · · · · ·	03042004	No Chg-P C	R2E034 (10/03)
DO NOT WRITE IN THIS SPAC			CE	4. FEI Number Applied For Not Applied For Not Applicable  5. Certificate of Status Desired S8.75 Additional Fee Required		
	6. Name and Address of Current Regis	tered Acent	<u> </u>	<u> </u>		7 00 7 10 quire 0
CRADDOCK, RAYMOND J JR 1145 LIVE OAK AVE. DAYTONA BCH, FL 32114			DO NOT WRITE IN THIS SPACE			
8. The above named entity subpring 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 positived agent.  SIGNATURE  SIGNATURE  (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ded to Fees	U00000031 03/18/04-800	383 27-011 150.00
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD CRADDOCK, RAYMOND J JR. 1145 LIVE OAK AVENUE DAYTONA BEACH, FL 32114					
TITLE NAME STREET ADDRESS CHY-61-ZIP						
RITE NAME SIREET ADDRESS CITY - ST - ZIP					NOT WR	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPA	CE 
TITLE NAME STREET ADDRESS GITY-ST-ZIP					w. e	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		7 - 7	Legen ( ) ( )			· <del>-</del>
12. I hereby indicated of the collaboration changed	certify that the information supplied with this on this report or supplemental report is true reportation or the receiver or profile empowers, or on an attachment with an analysis. With a	illing does not qualify for the ext and accurate and that my signs of to execute this report as requ ill other like empowered.	emption stated in S ature shall have the dired by Chapter 60	tection 119.07(3) same legal effe 07, Florida Statut	(I), Florida Statutes, I furth ct as if made under oath; es; and that my name app	er certify that the information that I am an officer or director ears in Block 10 or Block 11 if

AGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: