2004 FOR PROFIT CORPORATION ANNUAL REPORT

CITY ST 28P

SIGNATURE:

Mar 22, 2004 08:00 AM Secretary of State DOCUMENT # P98000066299 PANE RUSTICA, INC. Mailing Address Prencipal Place of Business 2821 MACDEL AVE S. 2821 MACDILL AVE S. TAMPA, FL 33629 TAMPA, FL 33629 03172004 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number List Appropriable 59-3524954 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CUNNINGHAM, CPA, CARLTON DO NOT WRITE 3242 HENDERSON BLVD SUITE 301 IN THIS SPACE TAMPA, FL 33609 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. parallet, order a later particularly the ediagonia of the flow const. ा है कि अध्याप्त हो शहर अध्याप्त है के उन्हें के बन से साथ भार 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. HILE BLOOD-KRUSZEWSKI, KAREN T E.Af.JE U00000093637 03/22/04-80026-002 150.00 STREET ASSESSED. 3119 GRANADA ST TAMPA, FL 33629 cary or 20. HELE KRUSZEWSKI, KEVIN A 1_AL3F 3119 GRANADA ST STREET ASSERTESS CH ST ZE TAMPA, FL 33629 Ts7LE 人人执征 STREET ALLOGESS DO NOT WRITE cur st ac IN THIS SPACE 3533.5 STREET ADORESS CHY ST ZIE DITLE 1.AME STREET AUGRESS CITY ST ZIT BILE LANE STREET ALICHESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED