2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000067496

Entity Name: SHOT GUN EAST, INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	TH HIATUS RC	PAD						
SUITE 100 PEMBROK	E PINES, FL 3	3026						
Current Mailing Address:				New Mailing Address:				
1000 NORTH HIATUS ROAD				1000 NORTH HIATUS ROAD				
STE 100 PEMBROKE PINES, FL 33026				SUITE 100 PEMBROKE PINES, FL 33026				
FEI Number:	65-0855353	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()		
Name and	Address of Cu	ırrent Registered Agent:		Name and	Address of Ne	w Registered Agent:		
E.H.G. RESIDENT AGENTS, INC. 5100 TOWN CENTER CIRCLE SUIT430 BOCA RATON, FL 33486 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,								
in the State								
SIGNATUR		c Signature of Registered Agen	+			 Date		
Election Cam		Trust Fund Contribution ().				Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name:	DVP ()[Delete RT B		Title: Name:	() C	Change () Addition		
Address: City-St-Zip:		ATUS ROAD, STE 100		Address: City-St-Zip:				
Title:		Delete		Title:	() C	Change () Addition		
Name: Address:	MILLER, LEONA 1000 NORTH HIA	RD ATUS ROAD,STE 100		Name: Address:				
City-St-Zip:	PEMBROKE PIN	ES, FL 33026		City-St-Zip:				
Title:	. ,	Delete		Title:	()0	Change () Addition		
Name: Address:	BERGER, ADOLI	PH ATUS ROAD STE. 100		Name: Address:				
City-St-Zip:	PEMBROKE PIN			City-St-Zip:				
Title:	DVP ()[Delete		Title:	()0	Change () Addition		
Name: Address:	BERGER, HELEI	NE ATUS ROAD STE. 100		Name: Address:				
City-St-Zip:	PEMBROKE PIN			City-St-Zip:				
Title: Name: Address: City-St-Zip:	MILLER-COTT, C	ATUS ROAD STE. 100		Title: Name: Address: City-St-Zip:	COTT, CORINNE	TUS ROAD STE. 100		
Title: Name: Address: City-St-Zip:	COTT, LAWREN	ATUS ROAD STE. 100		Title: Name: Address: City-St-Zip:	()0	Change () Addition		

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.

	Flatania Cianatana et Ciania a Offica a Piantan		D-1-
SIGNATURE:	LAWRENCE J. COTT	VPT	04/29/2004