2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

05-04-2004 90148 011 ***150 00 DOCUMENT # P98000089213 1. Entity Name ZAMPOLINO DEVELOPMENT CORPORATION **74000100** Principal Place of Business Mailing Address 1 FARRADAY LANE 1 FARRADAY LANE PALM COAST, FL 32137 PALM COAST, FL 32137 04282004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3538465 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZAMPOLINO, ALBERT K DO NOT WRITE 1 Farraday Lane 3 WOODSIDE DRIVE-PALM COAST, FL 32164 Palm Coast, F1 32137 IN THIS SPACE 8. The above named entity submits this Atatement 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 SIGNATURE gent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ZAMPOLINO, ALBERT K 1 Farraday Lane 3 WOODSIDE DRIVE STREET ADDRESS PALM COAST FL 32164 Palm Coast, FL 32137 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-Z/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 man 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 10 or Block 11 is changed, or on an attachment with an experience of the corporation of 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 is changed, or on an attachment with an experience of the corporation of the receiver or trustee.

IC OFFICER OR DIRECTOR

FILED

May 04, 2004 8:00 am Secretary of State

Daytime Phone #