2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 28, 2004 8:00 am Secretary of State 04-28-2004 90177 006 ***150.00

Principal Place of Business 2469 PROVENCE CIR 2500	DOCUMENT # P98000090860 1. Entity Name JOST INDUSTRIES, INC.								* n =	
2469 PROVENCE CIR WESTON, FL. 33327 WEST	Principal Place of Business Mailing Address					7		9406	3332	
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S. Certificate of Status Desired Fee Required S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Name Street Address (P.O. Box Number is Not Acceptable) Street Address	City & State		City & State							
Name Street Address (P.O. Box Number is Not Acceptable)	Zip	Country Zip		Cour	ntry	5 Certificate of Status Desired				
- IVANS. LEONARD STRET ADDRESS - CHAPTER NOW THE FILE 3332319	6. Name and Address of Current Registered Agent									
Street Address (P.O. Box Number is Not Acceptable) WESTON FL 33327 a. The above named five purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligator of programs agent agent. SIGNATURE SIGNATURE SUMMITTEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust F	-IVANS-LEONARD				Name					
B. The above named give, upwrite this glatement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of projectoring agent and take if applicable. **SIGNATURE** **PANOUTH 10 below 10 b	975 SHOTOUN ROAD				Street Address (P.O. Box Number is Not Acceptable)					
B. The above namped \$19ty superts this guarment for the purpose of changing its registered algent, or both, in the State of Florida. I am familiar with, and accept the obligations of polishard agent. SIGNATURE SIGNATUR	2469 PROVENCE CIECLE									
SIGNATURE SUSA NORTH CONTROLL SUSA NORTH CARRY OF INTERCEMENT Agent superative required when redirectors) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS	WESTON, FL. 33327									
### Delete Properties Prope		named entity submits this statement for ions of registered agent.	or the purpose of changing its	register	ed office or regist	ered agent, or both	, in the State of F	lorida. I am far	niliar with,	and accept
After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.	SIGNATURE	Signature, typed or purified frame of registered agent	and title if applicable. (NOTE	: Registere	ed Agent signature requi	red when reinstating)	4	-21-i	24	
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		certify that the information supplied with	In this illing does not qualify fo			Section 119.07(3)(i), Florida Statutes	s. I further certif	y that the i	nformation

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 of trustee impowered 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 application, with all other like empowered.