

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000091952

FILED
Apr 30, 2004
Secretary of State

Entity Name: PERFECT TEAM, INC.

Current Principal Place of Business:

5921-100 W BEAVER STREET
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 440379
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 59-3550604 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A. JEFFREY TOMASSETTI
406 ASH STREET
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBBINS, JACQUELYN P
Address: 5921-100 W. BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32254

Title: D () Delete
Name: ROBBINS, WILLIAM S
Address: 5921-100 W. BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32254

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: ROBBINS, WILLIAM E
Address: 5921-100 W. BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32254

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.

SIGNATURE: JACQUELYN P ROBBINS

PRES

04/30/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date