## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered

SIGNATURE: -

**FILED** Feb 02, 2004 08:00 AM DOCUMENT # P98000096447 **Secretary of State** 1. Entity Name PREK, INC. Principal Place of Business Mailing Address 6815 N. ROME AVE. 6815 N. ROME AVE. TAMPA, FL 33604 TAMPA, FL 33604 No Chg-P CR2E034 (10/03) 01202004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3545959 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRUMFIELD, TOMMIE L DO NOT WRITE 1328 NASSAU ST. TAMPA, FL 33607 IN THIS SPACE 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, typed or printed name of registered agent 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 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME BRUMFIELD, TOMMIE L U00000030895 02/04/04-80128-003 150.00 STREET ADDRESS 6815 N. ROME AVE. TAMPA, FL 33604 CITY-ST-ZIP DVPT TITLE BRUMFIELD, JAMES A NAME 6815 N. ROME AVE. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33604 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 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

Tommie L. Brumfield

813-930-2988

President

OFFICER OR DIRECTOR