

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000103880

Entity Name: THE BRAILLE SPOT, INC.

FILED
Apr 21, 2004
Secretary of State

Current Principal Place of Business:

3905 S TROPICAL TRAIL
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

3905 S TROPICAL TRL
MERRITT ISLAND, FL 32952 US

Current Mailing Address:

3137 WINCHESTER DRIVE
COCOA, FL 32926 US

New Mailing Address:

3905 S TROPICAL TRL
MERRITT ISLAND, FL 32952 US

FEI Number: 59-3549452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERTHOLET, AMY E
3137 WINCHESTER DRIVE
COCOA, FL 32926 US

Name and Address of New Registered Agent:

BERTHOLET, AMY E
3905 S TROPICAL TRL
MERRITT ISLAND, FL 32952 US

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: AMY E BERTHOLET

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDST () Delete
Name: BERTHOLET, AMY E
Address: 3137 WINCHESTER DRIVE
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: BERTHOLET, AMY E
Address: 3905 S TROPICAL TRL
City-St-Zip: MERRITT ISLAND, FL 32952

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: AMY E BERTHOLET

PDST

04/21/2004

Electronic Signature of Signing Officer or Director

Date