

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000006670

FILED  
Feb 18, 2004  
Secretary of State

Entity Name: ADVENTUROUS CONCEPTS, INC.

## Current Principal Place of Business:

2897 S.W. 13 STREET  
FT. LAUDERDALE, FL 33312

## New Principal Place of Business:

16115 EAST DURAN BLVD  
LOXAHATCHEE, FL 33470

## Current Mailing Address:

2897 S.W. 13 STREET  
FT. LAUDERDALE, FL 33312

## New Mailing Address:

16115 EAST DURAN BLVD  
LOXAHATCHEE, FL 33470

FEI Number: 65-0899470

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOLASCHI, JAMES  
2897 S.W. 13 STREET  
FT. LAUDERDALE, FL 33312 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: PD ( ) Delete  
Name: ARNSPIGER, MICHAEL  
Address: 2897 S.W. 13 STREET  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: VOCF ( ) Delete  
Name: MOLASCHI, JAMES  
Address: 2897 S.W. 13 STREET  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: VPMD ( ) Delete  
Name: WALKER, JOHN A  
Address: 4166 NW 65TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33067

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ARNSPIGER, MICHAEL  
Address: 16115 EAST DURAN BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VOCF (X) Change ( ) Addition  
Name: MOLASCHI, JAMES  
Address: 16115 EAST DURAN BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470

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

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: JAMES MOLASCHI

VOCF

02/18/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date