2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004
Secretary of State

DOCUMENT# P99000008159

Entity Name: HORSE MPOWER, INC

Current Principal Place of Business:

114 SOUTHEAST FIRST STREET
SUITE 4
GAINESVILLE, FL 32601

New Principal Place of Business:

4920 SE 155 STREET
HAWTHORNE, FL 32604

Current Mailing Address:

114 SOUTHEAST FIRST STREET
SUITE 4
GAINESVILLE, FL 32601

New Mailing Address:

4920 SSE 155 STREET
HAWTHORNE, FL 32604

FEI Number: 59-3562738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RETH, THERESA A
108 NORTH MAGNOLIA AVENUE
OCALA NATIONAL BANK BLDG., STE. 318
OCALA, FL 34475 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SOKOLOF, MARILYN
Address: 114 SOUTHEAST FIRST ST., SUITE 4
City-St-Zip: GAINESVILLE, FL 32601

Title: D ( ) Delete
Name: STUART, MEMREE O
Address: 4920 SE 155 STREET
City-St-Zip: HAWTHORNE, FL 32640

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MEMREE O. STUART D 05/10/2004

Electronic Signature of Signing Officer or Director — Date