

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000021177

Entity Name: JOBWAREHOUSE.COM, INC.

FILED  
Feb 20, 2004  
Secretary of State

## Current Principal Place of Business:

17 SOUTH ORANGE AVE  
ORLANDO, FL 32801

## New Principal Place of Business:

PO BOX 161526  
ALTAMONTE SPRINGS, FL 32716

## Current Mailing Address:

17 SOUTH ORANGE AVE  
ORLANDO, FL 32801

## New Mailing Address:

PO BOX 161526  
ORLANDO, FL 32716

FEI Number: 59-3562267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOVICK, PATRICK A  
17 S ORANGE AVE  
ORLANDO, FL 32801

## Name and Address of New Registered Agent:

NOVICK, PATRICK A  
860 N. ORANGE AVE. #416  
ORLANDO, FL 32801

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: PATRICK NOVICK

02/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P (X) Delete  
Name: STAFNE, MARK A  
Address: 17 S ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

Title: VP ( ) Delete  
Name: NOVICK, PATRICK A  
Address: 17 S ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: NOVICK, PATRICK A  
Address: 860 N. ORANGE AVE  
City-St-Zip: ORLANDO, FL 32801

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: PATRICK NOVICK

P

02/20/2004

Electronic Signature of Signing Officer or Director

Date