2004 FOR PROFIT CORPORATION - ANNUAL REPORT

FILED Mar 02, 2004 08:00 AM **DOCUMENT # P99000037345 Secretary of State** DILLEY ACCOUNTING & TAX SERVICE, INC. Principal Place of Business Mailing Address 1289 VICTORIA DR. 1289 VICTORIA DR. WEST PALM BEACH, FL 33406 WEST PALM BEACH, FL 33406 02282004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0914276 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DILLEY, NELLIE G DO NOT WRITE 1289 VICTORIA DR. WEST PALM BEACH, FL 33406 IN THIS SPACE 3. 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. 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 After May 1, 2004 Fee will be \$550.00 U000000073523 Trust Fund Contribution. Added to Fees /02/04-80039-022 OFFICERS AND DIRECTORS 10. PTD TITLE DILLEY, NELLIE G. NAME STREET ADDRESS 1289 VICTORIA DR. CITY-ST-ZP WEST PALM BEACH, FL 33406 TITLE VSD DILLEY, HAROLD O NAME 1289 VICTORIA DR STREET ADDRESS WEST PALM BEACH, FL 33406 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP