2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2004 08:00 AN

DOCUMENT # P9900064488 1. Enlity Name ISLAND TAN OF VERO, INC.			Secretary of Star		
Principal Place of Business Mailing Address 980 14TH LANE 980 14TH LANE VERO BEACH, FL 32960-4734 VERO BEACH, FL 32960-4734					.
DO NOT WRITE IN THIS SPACE				02202004 No Chg-P CR2E034 (10/03) 4. FEI Number	
6. Name and Address of Current Registered Agent ROSE, DEBRA 980 14TH LANE VERO BEACH, FL 32960-4734			DO NOT WRITE IN THIS SPACE		
8. 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 renetating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be led to Fees	
10. OFFICERS AND DIRECTORS TITLE NAME ROSE, DEBRA STREET ADDRESS CITY ST-ZIP VERO BEACH, FL 32960 TITLE			U0000080239 03/08/04-80101-005 150.00		
NAME STREET ADDRESS CITY-ST-ZIP FITLE MAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
FITLE NAME STREET ADDRESS CITY-ST-ZIP					

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: Debra lose Plas.

SIGNATURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

772-794-1/3 8 Daytime Phone #