

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065834

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: SEKUR REPAIR, INC.

## Current Principal Place of Business:

9100 HAMMAND AVE.,STE.A  
PENSACOLA, FL 32514

## New Principal Place of Business:

9100 HAMMAN AVE.,STE.B  
PENSACOLA, FL 32514

## Current Mailing Address:

9100 HAMMAND AVE.,STE.A  
PENSACOLA, FL 32514

## New Mailing Address:

9100 HAMMAN AVE.,STE.B  
PENSACOLA, FL 32514

FEI Number: 59-3593452

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAW, DAVID  
3331 SUMMIT BLVD  
PENSACOLA, FL 32503 US

## Name and Address of New Registered Agent:

SHAW, DAVID  
5890 B SPANISH TRAIL  
PENSACOLA, FL 32504 US

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: DAVID SHAW

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: STILLE, MICHAEL  
Address: 111 SUMMER BROOKE  
City-St-Zip: PEACHTREE CITY, GA

Title: VS ( ) Delete  
Name: SHAW, DAVID  
Address: 3331 SUMMIT BLVD.  
City-St-Zip: PENSACOLA, FL 32503

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: STILLE, MICHAEL  
Address: 100 HILLSIDE DRIVE  
City-St-Zip: PEACHTREE CITY, GA

Title: VS (X) Change ( ) Addition  
Name: SHAW, DAVID  
Address: 5890 B SPANISH TRAIL  
City-St-Zip: PENSACOLA, FL 32504

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: DAVID SHAW

VS

04/27/2004

Electronic Signature of Signing Officer or Director

Date