FILED

ANNUAL REPORT			Mar 25, 2004 08:00 AM		
DOCUMENT # P99000075479 1. Entity Name PRUETT IMPRESSIONS, INC.			Secretary of State		
Principal Place of Business 1040 HERNDON SARASOTA, FL 34232	Mailing Address P.O. BOX 20724 SARASOTA, FL 34276				
	ITE IN THIS SPA	CE	03092004 4. FEI Numb 65-094	No Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
5. Name and Address of C PRUETT, WILLIAM B 1040 HERNDON SARASOTA, FL 34232	Jurrent Registered Agent			NOT W THIS SP	
The above named entity submits this state the obligations of registered agent. SIGNATURE Signature, hyped or printed name of register.	ett wn.	ered office or register Agent signature required	et .	th, in the State of Flo	•
FILE NOWN FEE IS \$150. After May 1, 2004 Fee will be	9. Election Campaign Fin. \$550.00 Trust Fund Contribution		.00 May Be led to Fees		
10. OFFICEF IIILE PD PRUETT, WILLIAM B STREET ADDRESS 1040 HERNDON CITY-ST-ZIP SARASOTA, FL 34232 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS AND DIRECTORS		-		
TITLE NAME		-1			

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Wm.B. Pruett wm.B. Pusting of Signing of Fice or Director

8-20-00H

941-951-143