2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 02, 2004 08:00 AM Secretary of State

772-380-2091

ANNUAL REPORT			Secretary of State			
DOCUMENT # P99000075705 LETITLY Name EAST COAST REPORTING, INC.				2001		
Principal Place of Business 2949 EDWARDS ROAD FORT PIERCE, FL 34981	Mailing Address 2949 EDWARDS ROAD FORT PIERCE, FL 34981	•				
	TE IN THIS SPA	CE	07022004 4. FEI Numi 65-09	No Chg-P	CR2E034	
THOMAS, JEFFREY G 2949 EDWARDS ROAD FORT PIERCE, FL 34981	urrent Registered Agent	-	-	NOT W THIS SF	-	
8. The above named entity submits this stater the obligations of registered agent. SIGNATURE Signature, typod or printed name of registers. FILE NOWILL FEE IS \$150.	ad agent and title if applicable. (NOTE, Register) 9. Election Campaign Final	ad Agent signature required	<u></u> _		PATE VIEW S. 607.15	93(2)(b), F.S., the
Due by September 8, 200 10. OFFICER: TILE D MAME THOMAS, JEFFREY G STREET ADDRESS CITY-SI-ZIP FORT PIERCE, FL 34981 RILE MAME STREET ADDRESS CITY-SI-ZIP	S AND DIRECTORS		· · · · · ·		<u> </u>	019 150.00
TIFLE NAME STREET ADDRESS CITY-SI-ZIP TIFLE NAME STREET ADDRESS CITY-SY-ZIP		DO NOT WRITE IN THIS SPACE				
STILE NAME STREET AUDRESS CITY-ST-ZIP TITLE NAME STREET AUDRESS						

12. Thereby certify that the information supplied with this filling 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 both, 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: