## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

## FILED Mar 01, 2004 08:00 AM Secretary of State

DOCUMENT # P99000087694  1. Entity Name RX REALTY EXPERTS, INC.  Principal Place of Business Mailing Address			•	Secretary of Stat	
211 EAST INTERNATIONAL SPEEDWAY BLVD. 211 EAST INTERNATIONAL SPEED DAYTONA BEACH, FL 32118 DAYTONA BEACH, FL 32118				# 1 mm () m m 1   1	T 1811 TUTI NEUTR NORTH WORTH WORTH WAS SELECTED WAS BUT WAS SELECTED
D	O NOT WRITE II		CE	02102004 No Chg·P CR2E034 (10/03)  4. FEI Number	
AMON, URSULA 211 E INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32118			DO NOT WRITE IN THIS SPACE		
SIGNATURE Ursula Amo.			and office or registered agent, or both, in the State of Florida. I am familiar with, and accept to the state of Florida. I am familiar with, and accept to the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with accept the state of Florida. I am familiar with accept the state of Florida.		
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.					
ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AMON, FELIX 4205 S ATLANTIC DAYTONA BEACH, FL 32127 ST AMON, URSULA 4205 S ATLANTIC AVE DAYTONA BEACH, FL 32127		polion stated in Se	IN T	NOT WRITE THIS SPACE
12. I hereby c indicated of the corp	ertify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered	ling does not qualify for the exer and accurate and that my signat to execute this report as requir	nption stated in Se ure shall have the s ed by Chapter 607	ction 119.07(3)( same legal effec , Florida Statute	i), Florida Statutes. I further certify that the information of as if made under cath, that I am an officer or director s, and that my name appears in Block 10 or Block 11 if