2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P99000091348

1. Entity Name
PRINCIPAL INVESTMENT CORP.

Principal Place of Business	Mailing Address
1992 BONNIE CT DUNEDIN, FL 34698	1992 BONNIE CT DUNEDIN, FL 34698

DO NOT WRITE IN THIS SPACE

01232004   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
59-3604088		Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TAX ACCOUNTING & RESEARCH INC
1992 BONNIE CT
DUNEDIN, FL 34698

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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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2004 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000152806 05/04/04-80101-015 150.00

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	BOLEK, RICHARD
STREET ADDRESS	1992 BONNIE CT
CITY-ST-ZIP	DUNEDIN, FL 34698
TITLE	VPD
NAME	JONES, LAWRENCE
STREET ADDRESS	1992 BONNIE CT.
CITY-ST-ZIP	DUNEDIN, FL 34698
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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: _Richard A Bolek_   4/29/04   727 733 7633

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #