## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 30, 2004 08:00 AM **Secretary of State** DOCUMENT # P99000094651 NATIONAL CONTRACTS, INC. Principal Place of Business Mailing Address 33920 US HWY 19 N 33920 US HWY 19 N STE-155 STE-155 PALM HARBOR, FL 34684 PALM HARBOR, FL 34684 No Chg-P CR2E034 (10/03) 01202004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-3611014 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIRESTONE, GREGORY DO NOT WRITE 10703 TAVISTOCK DR TAMPA, FL 33626 IN THIS SPACE 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 ages red eigent and title if applicable SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. CEO TITLE FIRESTONE, GREGORY NAME STREET ADDRESS 10703 TAVISTOCK TAMPA, FL 33626 CITY-ST-ZIP TITLE DAUSCH, JAMES NAME 5003 CARRIBEAN CT STREET ADDRESS CITY-ST-ZIP LUTZ, FL 33549 U00000022584 01/30/04=80051-002 150.00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED**