

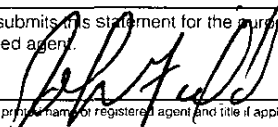
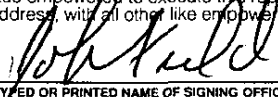


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90066 015 ***150.00

DOCUMENT # S37518 1. Entity Name JOHN W. FIELD, P.A.					
Principal Place of Business 777 SE 2ND AVE UNIT 118C DEERFIELD BEACH FL 33441 US			Mailing Address 461 E. HILLSBORO BLVD SUITE 100 DEERFIELD BEACH FL 33441 US		
2. Principal Place of Business 12 MARKHAM A		3. Mailing Address SUITE 100			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		MOORE CR2E034 (11/03)	
City & State Deerfield Beach, FL		City & State 		4. FEI Number 65-0250363	
Zip 33442 Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FIELD, JOHN W. 777 SE 2ND AVE UNIT 118C DEERFIELD BEACH FL 33441			7. Name and Address of New Registered Agent Name JOHN W. FIELD Street Address (P.O. Box Number is Not Acceptable) 12 MARKHAM A City Deerfield FL Zip Code 33442		
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  DATE 1/27/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PST <input type="checkbox"/> Delete NAME FIELD, JOHN W STREET ADDRESS 777 SE 2ND AVE 118C CITY-ST-ZIP DEERFIELD BEACH FL 33441			<input type="checkbox"/> Change <input type="checkbox"/> Addition 12 MARKHAM A O.B., FL 33442		
TITLE D <input type="checkbox"/> Delete NAME FIELD, JOHN W STREET ADDRESS 777 SE 2ND AVE 118C CITY-ST-ZIP DEERFIELD BEACH FL 33441			<input type="checkbox"/> Change <input type="checkbox"/> Addition 12 MARKHAM A D.B., FL 33442		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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:  JOHN W. FIELD DATE 1/27/04 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #</small>					