## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# S74055

FILED Apr 14, 2004 Secretary of State

Entity Name: HIGH PERFORMANCE SYSTEMS INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:		
	RICAN SUPE HAVEN, FL 3:			
Current Mailing Address:		New Mailing Addres	s:	
	RICAN SUPE HAVEN, FL 3:			
El Number	: 59-3091865	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	l Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
		RIOR BLVD		
MINTERF	HAVEN, FL 3:			
The above	HAVEN, FL 3:	3880 US	ourpose of changing its registere	ed office or registered agent, or both,
The above	HAVEN, FL 3: named entity e of Florida.	3880 US	ourpose of changing its registere	ed office or registered agent, or both,
The above n the State	HAVEN, FL 3: named entity of Florida.  RE:	3880 US		ed office or registered agent, or both,  Date
The above n the State	HAVEN, FL 3: named entity of Florida.  RE: Electro	3880 US submits this statement for the រ		
The above n the State SIGNATUR	HAVEN, FL 3: named entity of Florida.  RE: Electro	submits this statement for the particle of Registered Aging Trust Fund Contribution ( ).	ent	
The above n the State SIGNATURE Election Car OFFICER: Name: Address:	named entity e of Florida.  RE: Electro mpaign Financir S AND DIREC	submits this statement for the particles of Registered Agric Signature of Registered Agric Trust Fund Contribution ( ).  CTORS:  ) Delete N, DWER CT	ent	Date
The above n the State SIGNATUR	e named entity e of Florida.  RE: Electro  mpaign Financir  S AND DIREC  V ( TAYLOR, JOH 6103 SKY FLO BARTOW, FL	submits this statement for the price Signature of Registered Aging Trust Fund Contribution ( ).  CTORS:  ) Delete N, DWER CT 33830  ) Delete RD J. SR., TION RD SE	ADDITIONS/CHANG Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD J. MUTO, SR P 04/14/2004