


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S86330</b> 1. Entity Name <b>ENDLESS SUMMER VACATIONS USA, LTD., CORP.</b>	
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Principal Place of Business <b>176-35 GULF BLVD SAINT PETERSBURG, FL 33708 US</b>	Mailing Address <b>176-35 GULF BLVD SAINT PETERSBURG, FL 33708 US</b>
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**DO NOT WRITE IN THIS SPACE**



01062004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3091808</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fees Required

6. Name and Address of Current Registered Agent

**WRIGHT, LESLIE N  
176-35 GULF BLVD  
REDINGTON SHORES, FL 33708**

**DO NOT WRITE  
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 agent.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating)

DATE **1-26-2003**

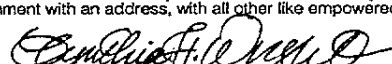
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT WRIGHT, N. LESLIE 8097 140TH ST. NO. SEMINOLE, FL 34646
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS WRIGHT, CYNTHIA H 8097 140TH ST. N. SEMINOLE, FL 34346
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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01/29/04-80041-023 158.75

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:  VP Sec Endless Summer Vac. 1-25-2004 727 3987700x25

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