2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S89102

Name:

Address: City-St-Zip: WARD, SUZANNE,

330 8TH AVE N UNIT 3

TIERRA VERDE, FL 33715

FILED Apr 02, 2004 Secretary of State

Entity Nan	ne: MISU OF P	INELLAS, INC.					
Current Principal Place of Business:			New Prir	New Principal Place of Business:			
330 8TH A	VE NORTH						
#3 TIERRA VE	ERDE, FL 3371	5 US					
Current M	ailing Address	1	New Mai	New Mailing Address:			
330 8TH A	VE NORTH						
#3 TIERRA VE	ERDE, FL 3371	5 US					
FEI Number:	59-3102092	FEI Number Applied For ()	FEI Number Not Ap	plicable ()	Certificate of Status Desired ()		
Name and	Address of Cu	rrent Registered Agent:	Name an	Name and Address of New Registered Agent:			
	DN, LISA S STE 750 ERTON ROAD TER, FL 33762	US					
The above in the State		bmits this statement for the	e purpose of changing	its registe	ered office or registered agent, or both,		
SIGNATUR	RE:						
	Electronic	Signature of Registered A	agent		Date		
Election Can	npaign Financing 1	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	V () D SMITHSON, LISA 1901 ULMERTON CLEARWATER, F	ROAD STE 750	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	PD () D WARD, MICHAEL 330 8TH AVE N U TIERRA VERDE, I	NIT 3	Title: Name: Address: City-St-Zip:	330 8TH	(X) Change () Addition MICHAEL A., AVE N UNIT 3 VERDE, FL 33715		
Title:	ST ()D	elete	Title:	ST	(X) Change ()Addition		

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.

Name:

Address:

City-St-Zip:

WARD, SUSANNE,

330 8TH AVE N UNIT 3

TIERRA VERDE, FL 33715

SIGNATURE: SUSANNE WARD ST 04/02/2004