## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 03, 2004 08:00 AM Secretary of State

DOCUI 1. Entity Name INSHALL					V	
Principal Place 708 MEADON PENSACOLA,	NVIEW LANE	Mailing Address 708 MEADOWVIEW LANE PENSACOLA, FL 32514				
				}		
DO NOT WRITE IN THIS SPAC				4. FEI Number 59-310 5. Certificate		
~-	6. Name and Address of Current Reg	stered Agent				
NGUYEN, KIM N 708 MEADOWVIEW LANE			DO NOT WRITE			
PENSACOLA, FL 32514			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 Signature, typed or printed name of registered agent and talle if applicable (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.			ncing <b>\$5.</b>			
10.	OFFICERS AND DIRE	CTORS {				
name Street address City-St-Zip	NGUYEN, NHUNG T 708 MEADOWVIEW LANE PENSACOLA, FL 32514					
TITLE NAME SIBEET ADDRESS CITY-ST-ZIP			_		-	
TIFLE NAME STREET ADDRESS CITY ST ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CRY ST-ZIP					THIS SPACE	
TITLE NAME STREET ADDRESS CHY-ST ZIP		1				
TOTE NAME STREET ADDRESS CITY+SI ZIP						
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Saction 119.07(3)(i). Florida Statutes 1 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.						