2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 19, 2004 8:00 am Secretary of State 04-19-2004 90736 045 ***150.00 **DOCUMENT # V20044** DANÍEL V. BURDO, P.A. Principal Place of Business Mailing Address 200 S SYKES CREEK PARKWAY 717 E OAK STREET #A810 KISSIMMEE, FL 34744 US MERRITT ISLAND, FL 32952 US No Cha-P 03172004 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3142749 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SWART, HARRY J CPA DO NOT WRITE 717 E. OAK ST. KISSIMMEE, FL 34744 IN THIS SPACE

8.	The above named entity submits this statement for the purpose of chan-	ging its registered	office or re	egistered agent, o	or both, in the State of Florida	I am familiar with, and accep
	the obligations of registered agent.	• •		•		,
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

SIGNATURE Signature, typed or printed name of registered agent and title if applicable

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. DPS TITLE NAME BURDO, DANIEL V. STREET ADDRESS 200 S. SYKEŞ CREEK PARKWAY, #A810 CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE BURDO, JOYCE NAME STREET ADDRESS

TITLE"

TITLE NAME STREET ADDRESS CITY-ST-ZIP

200 S. SYKES CREEK PARKWAY, #A810

CITY-ST-ZIP MERRITT ISLAND, FL 32952

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

FILED

Applied For

Not Applicable

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 tike empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #