2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 08, 2004 08:00 AM Secretary of State

DOCUMENT # V33879 1. Entity Name SJOLLANT, INC.				·
Principal Place of Business 259 S. INDUSTRIAL DR. ORANGE CITY, FL 32763 US	Mailing Address 259 S. INDUSTRIAL DR. ORANGE CITY, FL 32763 L	ds ·	11999	### (###
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent			03152084 4. FEI Numb 59-311	
CHRISTIANSEN, JAYNE I. 1172 VICKSBURG ST. DELTONA, FL 32725		DO NOT WRITE IN THIS SPACE		
8. The above paged 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 Synature, type or printee name of registered agent and title 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 Final Trust Fund Contribution.		.00 May Be led to Fees	V
10. OFFICERS AND D TITLE P MAME CHRISTIANSEN, ALFRED R. STREET ADDRESS 1172 VICKSBURG ST. CITY-ST-ZP DELTONA, FL	IRECTORS .			U00000106228 04/08/04-80007-007 150.00
TITLE V NAME CHRISTIANSEN, JAYNE I. STREET ADDRESS 1172 VICKSBURG ST. CITY-SI-ZEP DELTONA, FL				54, 05, 04, 55,061,-061, 130°68
NAME STREET ADDRESS CITY-ST-ZIP				NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IIV	THIS SPACE
TITLE NAME SIRLET ADDRESS CITY-ST-ZIP				
STREET ADDRESS CITY-ST-ZUP				
 I hereby certify that the information supplied with t indicated on this report or supplemental report is t of the corporation or the receiver or trustee empty changed, or on an attachment with an address, we 	rue and accurate and that my signa vered to execute this report as requ	emption stated in Se ture shall have the ired by Chapter 601	ection 119.07(3) same legal effe 7, Florida Statut	(f), Florida Statutes I further certify that the information of as if made under oath; that I am an officer or director es, and that my name appears in Block 10 or Block 11 if