


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 23, 2004 08:00 AM
Secretary of State**

DOCUMENT # V36565 1. Entity Name STUDIO 2000, INC.	
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Principal Place of Business 706 ALTAIR AVE FT MYERS, FL 33913 US	Mailing Address PO BOX 62187 FT MYERS, FL 33906
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DO NOT WRITE IN THIS SPACE



04172004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0342929	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

LEYES, HAROLD J
706 ALTAIR AVE
FORT MYERS, FL 33913

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000127470 04/23/04-80075-014 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEYES, HAROLD J. PO BOX 62187-706 ALTAIR AVE FT MYERS, FL 33906
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LEYES, JOYCE M. PO BOX 62187-706 ALTAIR AVE FT MYERS, FL 33906
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: *Harold J. Leyes* **4/21/2004** **239-369-3007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #