2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2004 08:00 AM Secretary of State DOCUMENT # V54672 1. Entity Name A. PANCO & COMPANY, INC. Principal Place of Business Mailing Address 3310 WEST CYPRESS ST. 3310 WEST CYPRESS ST. STE 205 STE 205 TAMPA, FL 33607 US TAMPA, FL 33607 US 04122004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3135930 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent REINA, SYLVIA DO NOT WRITE 3310 W CYPRESS SUITE 201 IN THIS SPACE TAMPA, FL 33607 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 SIGNATURE Squature, typed or printed name of registered agent and trie 6 applicable. (NOTE: Registered Agent argnature required when remeating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS IIII F NAME REINA, SYLVIA STREET ADDRESS. 3310 WEST CYPRESS ST. STE 205 CITY-ST-ZIP TAMPA, FL -U00000132928 04/27/04-80066-014 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP BILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CTTY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes, I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under oalt; that I am an officer or director of the corporation or the receiver or trusted imported 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.

SIGNING OFFICER OF DIRECTOR

FILED

SYLVIA REINA

CITY-ST-ZIP

SIGNATURE: