

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000089085

FILED
Jun 21, 2004
Secretary of State

Entity Name: ALBETH, INC.

Current Principal Place of Business:

7635 FALCON STREET
JACKSONVILLE, FL 32244 US

New Principal Place of Business:

4531 PARK ST
JACKSONVILLE, FL 32205 US

Current Mailing Address:

7635 FALCON STREET
JACKSONVILLE, FL 32244 US

New Mailing Address:

4531 PARK ST
JACKSONVILLE, FL 32205 US

FEI Number: 59-3419662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUNDQUIST, ALEX J. W
7635 FALCON STREET
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

LUNDQUIST, ALEX J. W
4531 PARK ST
JACKSONVILLE, FL 32244 US

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.

SIGNATURE:

06/21/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: LINDQUIST, ALEX J.W.
Address: 7635 FALCON ST
City-St-Zip: JACKSONVILLE, FL

Title: TS () Delete
Name: LINDQUIST, ESSIE C
Address: 7635 FALCON ST
City-St-Zip: JACKSONVILLE, FL

Title: VP () Delete
Name: LINDQUIST, MICHELE
Address: 7635 FALCON STREET
City-St-Zip: JACKSONVILLE, FL 32244 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: LINDQUIST, ALEX J.W.
Address: 4531 PARK ST
City-St-Zip: JACKSONVILLE, FL 32205

Title: TS (X) Change () Addition
Name: ESSIE, C
Address: 4531 PARK ST
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP (X) Change () Addition
Name: LINDQUIST, MICHELE
Address: 4531 PARK ST
City-St-Zip: JACKSONVILLE, FL 32205 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEX LINDQUIST

PT

06/21/2004

Electronic Signature of Signing Officer or Director

Date