

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002994

FILED
Apr 16, 2004
Secretary of State

Entity Name: INK FX, INC.

Current Principal Place of Business:

653 LONESOME PINE RD.
BYBEE, TN 37713

New Principal Place of Business:

Current Mailing Address:

653 LONESOME PINE RD.
BYBEE, TN 37713

New Mailing Address:

FEI Number: 58-2498427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNETT, TALAN
2030 SW 71ST TERRACE BAY D10
DAVIE, FL 33317 US

Name and Address of New Registered Agent:

CORNETT, TALAN
5215 SW 121ST TERRACE
COOPER CITY, FL 33330 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: _____

Electronic Signature of Registered Agent

04/16/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: CORNETT, JIMMY R
Address: 653 LONESOME PINE RD.
City-St-Zip: BYBEE, TN 37713

Title: VCV () Delete
Name: CORNETT, T. ALAN
Address: 12163 SW 51ST PLACE
City-St-Zip: COOPER CITY, FL 33330

Title: DS () Delete
Name: CORNETT, STARR E
Address: 653 LONESOME PINE RD.
City-St-Zip: BYBEE, TN 37713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VCV (X) Change () Addition
Name: CORNETT, T. ALAN
Address: 5215 SW 121ST TERRACE
City-St-Zip: COOPER CITY, FL 33330

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STARR CORNETT

Electronic Signature of Signing Officer or Director

SECY

04/16/2004

Date