

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005533

FILED
Feb 11, 2005
Secretary of State

Entity Name: CARDEL MASTER BUILDER, INC.

Current Principal Place of Business:

8804 SHALLOWCREEK LANE
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

8804 SHALLOWCREEK LANE
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 59-3518495 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORLESS, THEODORE A
CORLESS & ASSOCIATES, PLC
4016 HENDERSON BLVD.
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OCKEY, RYAN
Address: 6010 12TH STREET S.E.
City-St-Zip: CALGARY ALBERTA T2H 2X2,

Title: V () Delete
Name: OCKEY, DELAINE
Address: 6010 12TH ST. SE
City-St-Zip: CALGARY ALBERTA, T2H2X2

Title: S () Delete
Name: OCKEY, CARYL
Address: 6010 12TH ST. SE
City-St-Zip: CALGARY ALBERTA, T2H2X2

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DELAINE OCKEY

V

02/11/2005

Electronic Signature of Signing Officer or Director

_____ Date