## **FILED** M

ANNUAL REPORT						2005 0	
1. Entity Nan	IMENT # P010000459			Secr	etary of	State	
401 SW 42 AVE		Mailing Address P.O. BOX 21026 FT. LAUDERDALE, FL 33335		1 <b>// 100</b> 100 100 100 100 100 100 100 100 10		: 2011	T ? )
E	OO NOT WRITE		CE	01282005 4. FEI Numbe 80-0029	Ņo Chg-P	CR2E034 (10/0	Applied For Not Applicable
		egistered Agent		<u> </u>	NOT W HIS SP		
the obligate SIGNATURE.	Signature, typed or printed name of registered agent and E NOW!!! FEE IS \$150.00	1 title if applicable (NOTE Register) 9. Election Campaign Fina	ed office or register  Agent signature required  noting \$5.	ed agent, or both when romstating)  OO May Be		rida. I am familiar v DATE	vith, and accept
	lay 1, 2005 Fee will be \$550.00		L Add	ed to Fees			
10.  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY - ST - ZIP	D SULIVAN, LEO P.O. BOX 21026 FT. LAUDERDALE, FL 33335	HECTORS				235031 300 <b>44:</b> :012	15000
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS					NOT W 'HIS SF		
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		•				<del></del>	
NAME	<b>\</b>		1				

the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is signature shall have the same legal effect as if made under oath, that I am an officer or director as required by Chapter 807. Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this filling does not qualify for y indicated on this report or supplemental report is true and accurate and that report is true and accurate and that report has changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR