2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT Jan 10, 2005 08:00 AM **DOCUMENT # P02000103941 Secretary of State** 1. Entity Name PHOENIX SALES ASSOCIATES, INC. Principal Place of Business __ Mailing Address 2279 SEMINOLE ROAD 2279 SEMINOLE ROAD SUITE 6 SUITE 6 ATLANTIC BEACH, FL 32233 ATLANTIC BEACH, FL 32233 No Chg-P 01072005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 04-3714685 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BREITBART, JERRE G DO NOT WRITE 2279 SEMINOLE ROAD SUITE 6 IN THIS SPACE ATLANTIC BEACH, FL 32233 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE BREITBART, JERRE G NAME 2279 SEMINOLE ROAD, SUITE 6 STREET ADDRESS ATLANTIC BEACH, FL 32233 CITY-ST-ZIP TITLE NAME STREET ADDRESS U00000174699 CITY-ST-ZIP --01/10/05-80021-002 150.00 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated on this report of supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED