

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014147

FILED
Jul 06, 2005
Secretary of State

Entity Name: THE EXPRESS SECRETARY, INCORPORATED

Current Principal Place of Business:

4404 WALLCRAFT AVE
TAMPA, FL 33611

New Principal Place of Business:

19220 BLOUNT RD.
LUTZ, FL 33558

Current Mailing Address:

4404 WALLCRAFT AVE
TAMPA, FL 33611

New Mailing Address:

19220 BLOUNT RD.
LUTZ, FL 33558

FEI Number: 56-2334596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALLABARRY-MALLICOTE, MARI LR
4518 NEW DAWN COURT
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

SALLABARRY-MALLICOTE, MARI LR
19220 BLOUNT RD.
LUTZ, FL 33558 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: MARI LR SALLABERRY-MALLICOTE

07/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SALLABERRY-MALLICOTE, MARI LR
Address: 4404 W. WALLCRAFT AVE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SALLABERRY-MALLICOTE, MARI LR
Address: 19220 BLOUNT RD.
City-St-Zip: LUTZ, FL 33558

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: MARI LR SALLABERRY-MALLICOTE

D

07/06/2005

Electronic Signature of Signing Officer or Director

Date