2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 11, 2005 08:00 AM Secretary of State DOCUMENT # P03000071341 1. Entity Name DOMÉNIQUE G. LOMBARDO BLANCHETTE, P.A. Mailing Address Principal Place of Business 13230 LAKE MARY JANE RD 13230 LAKE MARY JANE RD ORLANDO, FL 32832 ORLANDO, FL 32832 07072005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 22-0065492 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOMBARDO BLANCHETTE, DOMENIQUE G DO NOT WRITE 13230 LAKE MARY JANE RD ORLANDO, FL 32832 IN THIS SPACE 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 FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE U00000371719 07/11/05-80003-004 158.75 LOMBARDO BLANCHETTE, DOMENIQUE G NAME STREET ADDRESS 13230 LAKE MARY JANE RD CITY-ST-ZIP ORLANDO, FL 32832 TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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 indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath, 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 of 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

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