## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Apr 26, 2005 8:00 am Secretary of State DOCUMENT # P04000116752 04-26-2005 90163 018 \*\*\*150.00 1. Entity Name CLEAR THINKING, INC. Principal Place of Business Mailing Address գրըսդրու 1306 COLUMBUS BLVD 1306 COLUMBUS BLVD MIAMI, FL 33134 MIAMI, FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04202005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20-150042 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PRUSNER, DENISE Street Address (P.O. Box Number is Not Acceptable) 1306 COLUMBUS BLVD MIAMI, FL 33134 City Zip Code 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. 4/20/05 SIGNATURE MUSMEN (NOTE: Registered Agent signature required when reinstating) 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition PRUSNER, WILLIAM A NAME NAME 1306 COLUMBUS BLVD STREET ADORESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33134 CITY-ST-7IP Delete TITLE TITLE ☐ Change Addition PRUSNER, DENISE NAME NAME 1306 COLUMBUS BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33134 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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.

**FILED**