

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000143554

FILED
Mar 14, 2005
Secretary of State

Entity Name: CBEAMER, INC.

Current Principal Place of Business:

204 SAULSALITO BOULEVARD
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

204 SAULSALITO BOULEVARD
CASSELBERRY, FL 32707 US

New Mailing Address:

FEI Number: 20-1805531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

KEICOR CONSULTING, INC.
815 ORIENTA AVE
STE 2020
ALTAMONTE SPRINGS, FL 32701 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: KEITH LEHMANN

03/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DURDEN, RUSTIN T
Address: 204 SAULSALITO BLVD
City-St-Zip: CASSELBERRY, FL 32707 US

Title: D () Delete
Name: BEAMER, CLAYTON
Address: 204 SAULSALITO BLVD
City-St-Zip: CASSELBERRY, FL 32707 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: DURDEN, RUSTIN T
Address: 204 SAULSALITO BLVD
City-St-Zip: CASSELBERRY, FL 32707 US

Title: DPST (X) Change () Addition
Name: BEAMER, CLAYTON
Address: 204 SAULSALITO BLVD
City-St-Zip: CASSELBERRY, FL 32707 US

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: KEITH LEHMANN

RA

03/14/2005

Electronic Signature of Signing Officer or Director

Date