


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000058946.
 1. Entity Name
 MUSEUMBOND, INC.



Principal Place of Business 12000 N NEBRASKA AVE SUITE C TAMPA FL 33612 US	Mailing Address 12000 N NEBRASKA AVE SUITE C TAMPA FL 33612 US
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04D12005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3334495	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 FELDMAN, ALAN
 498 LAKEWOOD DRIVE
 BRANDON, FL 33510

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELDMAN, ALAN 498 LAKEWOOD DRIVE BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M STERLING-EUBANK, MARTHA 9401 TAKOMAH TRAIL TAMPA, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 04/04/05-80082-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: Martha Skellie-Eubank (STERLING-EUBANK) 4/1/05 (813) 977-737
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #