2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2005 08:00 AM Secretary of State

Daytime Phone #

1. Entity Nam	MENT # P950000660 ATION, INC.	062			Se	cretary	of State
Principal Place of Business Mailing Address 11111 BISCAYNE BLVD JOCKEY III 11111 BISCAYNE BLVD JOCKEY #2054 # 2054 MIAMI, FL 33181 MIAMI, FL 33181			EY III				
DO NOT WRITE IN THIS SPAC			CE	03072005 4. FEI Numb 65-060	No Chg-P	CR2E034 (1	
	6. Name and Address of Current Re	gistered Agent			The second secon	##***# 2 · . 1 ·	
WESTON, MARY 11111 BISCAYNE BLVD JOCKEY III #2054 MIAMI, FL 33181					NOT W		
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.							
तान कार्युद्धारकार या विद्यादासम्बद्धाः । 							
SIGNATURE							 _
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financin Trust Fund Contribution.				5.00 May Be ded to Fees			
10.	OFFICERS AND DI	RECTORS			Market Committee	nts C	· / · · · ·
NAME STREET ADDRESS GITY-ST-ZIP	D WESTON, MARY 11111 BISCAYNE BLVD JOCKEY MIAMI, FL 33138]]! #2054 _			# ! 000	100339758	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					04/28/C	100333136 S-80087-1	022 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	a.
TITLE NAME STREET ADDRESS CITY-ST-ZIP				ĪN.	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			T 72 (2.4)	ਤਾਂ±ਾ, ਜ			
TITLE NAME STREET ADDRESS			-112-2			eneries.	

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.

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR/DIRECTOR