2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 15, 2005 8:00 am Secretary of State

04-15-2005 90105 029 ***150.00

DOCUMENT # P97000100394 1. Entity Name ACTION MOBILE, INC.						04-15-2005	90105 029 ***1:	50.00
Principal Place	e of Business	Mailing Address						
1052 SATELLITE BLVD. Orlando, Fl. 32837		P.O. BOX 771273 ORLANDO, FL 32877			20034	482		
		*				an nad di		
2. Principal Pl	ace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01192005	Chg-P	CR2E034 (10/03)		
City & State		City & State		4. FEI Number	200	ļ	pplied For	
Zip	Country	Zip	Count	try	59-34906 5. Certificate of		□ \$8.75 Ad	
-	6. Name and Address of Current	Registered Agent	L		<u> </u>	ddress of New R	Fee Requin	∍d
		riegistered Agent		Name	7. Hame and A		ograndi Agent	-
DOUGLAS, JOHN C 11052 SATELLITE BLVD. ORLANDO. FL 32837				Street Address (P.O. Box Number is Not Acceptable)				
4	, FL 32037							
				City	FL Zip Code			
	named entity submits this statement for cons of registered agent. Signature, typed or printed name of registered agent.			ed office or register		in the State of Flo	rida. I am familiar with	, and accept
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.	9. Election Campa Trust Fund Cont	_		.00 May Be led to Fees			
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CI	HANGES TO OFFI	ICERS AND DIRECTOR	RS IN 11
TITLE Name	PD							
	LDOUGLAS JOHNIC	☐ Delete	TITLE	l l			☐ Change	Addition
STREET ADDRESS	DOUGLAS, JOHN C 11052 SATELLITE BLVD.	☐ Delete	NAM	l l			☐ Change	
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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)(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 employered 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.

Multiple Daugh CHRISTENE DOUBLAS
SIGNATURE AND TYPED OR PRINTED NAMED SIGNING OFFICER OR DIRECTOR 4-11-05 Date 407-851-1800 Daytime Phone # SIGNATURE: