2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2005 08:00 AM

1. Entity Nar	JMENT # P990001087 POWER PLANT VILLAGE, INC			Secreta	ary of State	
1632 PENN	ce of Business ISYLVANIA AVE JH, FL 33139 US	Mailing Address 1632 PENNSYLVANIA AVE MIAMI BEACH, FL 33139	JS			1 1441 I 111 1 1541 I 11 541 I1141
	OO NOT WRITE	IN THIS SPA	CE	01252005 No C		E034 (10/03) Applied For
				65-0976465 5. Certificate of Status	Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Rec	istered Agent		Control of	अर्देष्ट	
ROBINS, CRAIG 1632 PENNSYLVANIA AVE MIAMI BEACH, FL 33139				DO NO	SPAC	E
8. The above the obliga SIGNATURE	a named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and ti	·	ed office or registe	•	tate of Florida, 1 ar	
Fil After M	E NOW!!! FEE IS \$150.00 lay 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		.00 May Be ded to Fees		
10.	OFFICERS AND DIR	ECTORS -		A STATE OF THE STA	4.56	· · · · · · · · · · · · · · · · · · ·
NAME STREET ADDRESS CITY-ST-ZIP	PD ROBINS, CRAIG 1632 PENNSYLVANIA AVE MIAMI BEACH, FL 33139			04/2	1000003211 21705-8006	07 4-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRETENSTEIN, STEVEN 1632 PENNSYLVANIA AVE MIAMI BEACH, FL 33139					
TITLE NAME STREET ADDRESS CITY+ST-ZIP			<u> </u>	DO NO	Γ WRIT	· - ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	IN THIS	SPAC	E
TITLE NAME STREET ADDRESS				·		

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 employered. The all other like empowered PLANT VILLAGE, INIC.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-531-8700 Daysme Phone # 31105