2005 FOR PROFIT CORPORATION

FILED Jan 24, 2005 08:00 AM

ANNUAL REPURI					- 600			
1. Entity Nam	MENT # S41254 R DEVELOPMENTS, IN					Se	ecretary	or State
%KEITH ALT	e of Business IZER AND CO ITIO AVE, 300 L 32751 US	9x 4	ailing Address 6KEITH ALTIZER 31 E HORATIO AVE, 300 IAITLAND, FL 32751	us				
E	OO NOT WRI	TE IN	N THIS SP	ACE	01042005	No Chg-P	CR2E034 (10,	
	· · · · · · · · · · · · · · · · · · ·				4. FEI Numb 59-305 5. Certificate		□ \$8.75 Fee Re	Not Applicable Additional
	6. Name and Address of Ci	urrent Regis	tered Agent		**************************************			
KIETH ALTIZER AND CO 431 E HORATIO AVE 300 MAITLAND, FL 32751						NOT W THIS SF		
	named entity submits this stater tions of registered agent.	nent for the p	surpose of changing its regi	stered office or registe	ered agent, or bo	oth, In the State of Flo	orida. I am familiar	with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered agent and title if applicable				istered Agent signature require	d when reinstating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.0 ay 1, 2005 Fee will be \$	10	9. Election Campaign F Trust Fund Contribut	inancing \$5	5.00 May Be ded to Fees			
10.		S AND DIREC	CTORS			TTT KETT W 1777-EEE ET		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SWIRSKY, JOANNE ELISE 3292 BAYVIEW AVE, STE TORONTO, ONTARIO, CA	300	2m4j5				··	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SWIRSKY, ELI 3292 BAYVIEW AVE, STE TORONTO, ONTARIO, CA		2m4j5			100000 01/25/05)192819 -80032-024	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NOT W	RITE	,
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN '	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				THE CONTROL ENGINEERS	KAN YANG - KA	A ATT TO THE TOTAL THE TOT	-	
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 expowered 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 emparated.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

ELI SWIRSKY