## 2004 FOR PROFIT CORPORATION

ANNUAL REPORT			Secretary of State			
	930			Secr	etary (	or State
	ASSOCIATION					
of Business /VIEW CENTRE, SUITE 2805 STREET 1330	Mailing Address BRICKELL BAYVIEW CENTRE, S 80 S.W. 8TH STREET MIAMI, FL 33130	UITE 2805				
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6. Name and Address of Current Re-	gistered Agent	I	manieri ne			10.14.2234.435
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named entity submits this statement for the one of registered agent.	e purpose of changing its register	ad office or register	ed agent, or both	, in the State of Floi	rida. I am famil	far with, and accept
signature, typod or printed name of registered agent and t	ide if applicable. (NOTE. Registere	d Agent signature required	when reinstating)		DATE	· · · · · · · · · · · · · · · · · · ·
NOW!!! FEE IS \$150.00 y 1, 2004 Fee will be \$550.00		· _ ••.				
OFFICERS AND DIF	RECTORS	P		700		787 - 21,-3
D MCALPIN, RICHARD J 80 S.W. 8TH STREET SUITE 2805		· · · · · · · · · · · · · · · · · · ·		Soft and soft and		A COLUMN
MIAMI, FL 33130 D	·		<u>}</u>			19 150 00
BRAIS, KEITH S 80 S.W. 8TH STREET, SUITE 2805 MIAMI, FL 33130			g Till general segment for the Section Seq.			
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			- 41, 11, 1	TELLE THE SHEET TO SEE		
	& BRAIS, PROFESSIONAL  de Business  WIEW CENTRE, SUITE 2805 STREET  130  ONOT WRITE  6. Name and Address of Current Reserved and Street  RICHARD J BAYVIEW CENTRE, SUITE 280 H STREET  33130  Demand entity submits this statement for the statement of registered agent.  NOW!!! FEE IS \$150.00  y 1, 2004 Fee will be \$550.00  OFFICERS AND DIF  D  MCALPIN, RICHARD J  80 S.W. 8TH STREET, SUITE 2805  MIAMI, FL 33130  D  BRAIS, KEITH S	& BRAIS, PROFESSIONAL ASSOCIATION  **Mailing Address**  **MILING Address**  **BRICKELL BAYVIEW CENTRE, S  **80 S.W. 8TH STREET, S  **MIAMI, FL 33130  **MILING ADDRESS ADD DIRECTORS**  **DO S.W. 8TH STREET, SUITE 2805  **MIAMI, FL 33130  **DO BRAIS, KEITH S  **80 S.W. 8TH STREET, SUITE 2805  **BRAIS, KEITH S  **80 S.W. 8TH STREET, SUITE 2805  **BRAIS, KEITH S  **80 S.W. 8TH STREET, SUITE 2805  **BRAIS, KEITH S  **80 S.W. 8TH STREET, SUITE 2805	& BRAIS, PROFESSIONAL ASSOCIATION  & BRAIS, PROFESSIONAL ASSOCIATION  **Mailing Address**  **Mailing Address**  **Mailing Address**  **Mailing Address**  **PRICKELL BAYVIEW CENTRE, SUITE 2805**  **BRICKELL BAYVIEW CENTRE, SUITE 2805**  **BRAIS, NEMERAL BAYVIEW CENTRE, SUITE 2805**  **BRAYVIEW CENTRE, SUIT	& BRAIS, PROFESSIONAL ASSOCIATION  **BRAIS, PROFESSIONAL ASSOCIATION  **Of Business	Sect # P98000021930  & BRAIS, PROFESSIONAL ASSOCIATION    Mailing Address   Mailing	Secretary (  BRAIS, PROFESSIONAL ASSOCIATION    A BRAIS, PROFESSIONAL ASSOCIATION

12. I hereby certify that the information supplied with this bing 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 flustee impowered 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 attachore with an actives, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CiTY-ST-ZIP