

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90024 034 ***150.00

DOCUMENT # P93000052147	
1. Entity Name SHOWPLACE OF FLAGLER, INC.	

Principal Place of Business C/O E.F. HUTTON REALTY SUITE 100 MIAMI, FL 33133 US	Mailing Address 2000 SOUTH DIXIE HWY 100 MIAMI, FL 33131 US
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03112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0420748	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FIELDSTONE, RONALD R
 201 ALHAMBRA CIR., 601
 STE. 2100
 MIAMI, FL 33134

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

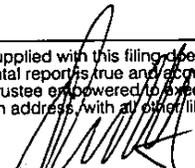
9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GOLKAR, REZA DR.
STREET ADDRESS	7010 MIRA FLORES
CITY-ST-ZIP	CORAL GABLES, FL 33143
TITLE	T
NAME	AGHA, ABDUL DR.
STREET ADDRESS	6701 SUNSET DR, 203 B
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	S
NAME	FIELDSTONE, RONALD R
STREET ADDRESS	201 ALHAMBRA CIR., 601
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	V
NAME	Ray Abbassi
STREET ADDRESS	2000 S. Dixie Hwy # 100
CITY-ST-ZIP	Miami, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 reports 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.

SIGNATURE:  3/21/05 305-856-5858
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #