2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M37545

9639 CORAL WAY

MIAMI, FL

Address:

City-St-Zip:

FILED Jul 20, 2005 Secretary of State

Entity Nan	ne: GREEN E	BRIAR WEST CORP.					
Current Pr	incipal Place	of Business:	New Princip	New Principal Place of Business:			
C/O GERA 9639 COR/ MIAMI, FL			9639 CORAL	C/O KAREN J. GREEN 9639 CORAL WAY MIAMI, FL 331658014 New Mailing Address:			
Current Ma	ailing Addres	s:	New Mailing				
9369 COR/ 9639 COR/ MIAMI, FL	AL WAY						
FEI Number:	59-2710909	FEI Number Applied For ()	FEI Number Not Applica	able ()	Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and A	Name and Address of New Registered Agent:			
KRINGOLE 9639 CORA MIAMI, FL			GREEN, KAI 9639 CORAL MIAMI, FL 3	L WAY			
The above in the State		submits this statement for the p	ourpose of changing its	registered o	office or registered agent, or both,		
SIGNATUR	RE: KAREN J	. GREEN		07/20/2005			
	Electron	ic Signature of Registered Age	ent	Date			
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.				
OFFICERS	AND DIREC	TORS:	ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () GREEN, PAUL (9639 CORAL W MIAMI, FL	*	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	D () GREEN, JOYCE 9639 CORAL W MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	DS () KRINGOLD, KA 9639 CORAL W MIAMI, FL	•	Name: 6 Address: 9	DS (X GREEN, KARE 9639 CORAL V MIAMI, FL	•		
Title: Name:	D () KING, JANICE A	Delete NN.	Title: Name:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: KAREN J GREEN 07/20/2005 D