## **2005 FOR PROFIT CORPORATION** ANNUAL REPORT

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SIGNATURE:

## Mar 11, 2005 08:00 AM **DOCUMENT # 403175 Secretary of State** FLORIDA VANTAGE PROPERTIES INC. Principal Place of Business Mailing Address 4295 N.W. 1 AVENUE 4295 N.W. 1 AVENUE BOCA RATON, FL 33431 BOCA RATON, FL 33431 03062005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1413952 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent GRIMES, RICHARD DO NOT WRITE 950 S.W. 16TH STREET BOCA RATON, FL 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\_ Signature, typed or printed name of registored agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE GRIMES, RICHARD NAME STREET ADDRESS 950 S.W. 16TH STREET CITY-ST-ZIP BOCA RATON, FL -- U00000259571 03/11/05-80029-018 150.00 TITLE NAME STREET ADDRESS CTTY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes 1 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to expect the this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

ike empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**