2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 419332

Name:

Address:

City-St-Zip:

JAMES, CHARLES C

790 MORNINGSIDE DR

MIAMI SPRINGS, FL 33166

FILED Jul 06, 2005 Secretary of State

Entity Nan	ne: 627 ELI	DRON DRIVE INC				
Current Principal Place of Business:				New Principal Place of Business:		
627 ELDRO MIAMI SPR	ON DRIVE INGS, FL 3	3166				
Current Mailing Address:			New Ma	New Mailing Address:		
627 ELDRO MIAMI SPR	ON DRIVE INGS, FL 3	3166				
FEI Number:	Number: FEI Number Applied For () F		FEI Number Not Ap	oplicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name ar	Name and Address of New Registered Agent:		
CARLSON, DAVID 8180 NW 36 ST #100 MIAMI, FL 33166 US				CARLSON, DAVID 627 ELDRON DRIVE MIAMI SPRINGS, FL 33166 US		
The above in the State		y submits this statement for the	purpose of changing	g its registere	ed office or registered agent, or both,	
SIGNATURE:				07/06/2005		
	Electr	onic Signature of Registered Ag	ent		Date	
		193(2)(b), F.S., the corporation did n ing Trust Fund Contribution ().	ot receive the prior no	tice.		
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	JAMES, JULI 790 MORNIN		Title: Name: Address: City-St-Zip	:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S CARLSON, D 8180 NW 36 MIAMI, FL 3	ST #100	Title: Name: Address: City-St-Zip	S CARLSON 627 ELDR MIAMI SPF		
Title [.]	Т	() Delete	Title [.]		() 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES JAMES T 07/06/2005