2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 18, 2005 8:00 am Secretary of State

1. Entity Nam	MENT # 438443				0047 004 ***150.00
Principal Plac	e of Business	Mailing Address		1	
	(WOOD BLVD.), FL 33020-6701	2134 HOLLYWOOD BLVD HOLLYWOOD, FL 33020-			50055847
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03302004 Chg-P	CR2E034 (10/03)
City & Stat	e	City & State		4. FEI Number 65-0041868	Applied For Not Applicable
Zip	Country	Zip	Country .	5. Certificate of Status Desi	red S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				7. Name and Address of N	ew Registered Agent
COULDELTE DAYA			Name A	NTHONY RE	STAINU
SCHLICHTE, RAY A. 2134 HOLLYWOOD BLVD.			Street Addres	s (P.O. Box Number is Not Accer	plable) it C.J.
HOLLYWOOD, FL 33020				enduale of	21-12
City			City P	MBROKE Pi	JES FL Zinggozy
B. The above	named entity submits this statement for	the purpose of changing its re	gistered office or regis	tered agent, or both, in the State	of Florida. am familiar with, and accept
the obligat	tions of registered agent.	75ta-	\mathcal{L}	1560 1	
SIGNATURE.	Signature, typed or printed regree of registered agent as	en (NOTE: R	4 ax () & E legistered Agere signature requi	S/A///O	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND (DIRECTORS	11,	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHLICHTE, RAY A., JR. 2134 HOLLYWOOD BLVD. HOLLYWOOD, FL. 33020	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition
TITLE		1	CITY-ST-ZIP		
RAME	SD ·	☐ Delete	CITY-S1-ZIP		Change Addition
i -	RESTAINO, ANTHONY	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP	RESTAINO, ANTHONY 1000 N. STATE RD. 7	☐ Delete	TILLE		Change Addition
STREET ADDRESS	RESTAINO, ANTHONY	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	RESTAINO, ANTHONY 1000 N. STATE RD. 7		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		,
STREET ADDRESS CITY-ST-ZIP	RESTAINO, ANTHONY 1000 N. STATE RD. 7		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	; ; ;5 4	,
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	RESTAINO, ANTHONY 1000 N. STATE RD. 7	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		, / ☐ Change ☐ Addition
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12. Thereby certify that the information supplied with this filling 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 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

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/04

9-14-432-2069

Daytime Phone #

ATTACHMENT 50022847 7/14/05 Re: Document = 438443 I did not receive ony Corp. annual Report - reflecting The May 1st headline. Please would late fees - and - find cheel for 150. Indered as There as (2004 Doc) - Please Note Change of Registered agait. Thonk you takey Lestars