

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 486157

FILED
May 03, 2005
Secretary of State

Entity Name: MADSEN, SAPP, MENA, RODRIGUEZ & CO., P.A. CERTIFIED PUBLIC ACCOUNTANTS

Current Principal Place of Business:

350 EAST LAS OLAS BLVD
1420
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

350 EAST LAS OLAS BLVD
1420
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 59-1623039 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RODRIGUEZ, RAMON A.
350 EAST LAS OLAS BLVD
SUITE 1420
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RODRIGUEZ, RAMON A.,
Address: 509 ROYAL PLAZA DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VD () Delete
Name: BENSON, ROBERT W
Address: 7540 NW 8TH COURT
City-St-Zip: PLANTATION, FL

Title: VD () Delete
Name: BREUNING, DANIEL J
Address: 520 NW 107TH AVE
City-St-Zip: PLANTATION, FL 33324

Title: VD () Delete
Name: ISZLER, TIMOTHY J
Address: 5100 MADISON STREET
City-St-Zip: HOLLYWOOD, FL 33021 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: RAMON A. RODRIGUEZ

PD

05/03/2005

Electronic Signature of Signing Officer or Director

Date