## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE:

## FILED Jan 26, 2005 08:00 AM Secretary of State

Daytime Phone #

ANNUAL REPORT				Jan 20, 2005 08:00 A			
1. Entity Nam	MENT # 493067	I CORP.			Sec	cretary	of State
Principal Place of Business		Mailing Address P0 B0X 290338 PT ORANGE, FL 32129 US					
D	OO NOT WRITE		CE	01192005  4. FEI Number 59-1631: 5. Certificate of		CR2E034 (10	
	6. Name and Address of Current Re	gistered Agent		,		7	
	RICHARD DOW LANE BCH., FL 32014		DO NOT WRITE IN THIS SPACE				
the obligat	Signature, typed or printed name of registered agent and		d Agent signature required		in the State of Flor	ida. I am familiar	with, and accept
FIL After M	E NOW!!!  FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00			ed to Fees	Hanna	1197274	
10. TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI PD SNYDER, RICHARD 2405 MEADOW LANE DAYTONA BCH., FL	RECTORS			UT/27705-	8000S-00S	5 150 <b>.0</b> 0
TITLE NAAME STREET ADDRESS CITY-ST-ZIP TITLE			DO NOT WRITE IN THIS SPACE				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				114	ino or	AUL	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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