## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED (/)
Mar 16, 2005 08:00 AM
Secretary of State

DOCU  1. Entity Nam  FORER,					Secretary of State	
Principal Place of Business Mailing Address 6815 SW 81 TERR 6815 SW 81 TERR MIAMI, FL 33143 US MIAMI, FL 33143 US				: 188112 41146 - 1174 1174	NINTA PINNON 1771 NYNIN NINYI NINYI NINYI NINYI NINYI NINYI NINYI NINYI NINYI	
DO NOT WRITE IN THIS SPACE				01122005 No Chg-P CR2E034 (10/03)  4. FEI Number		
6. Name and Address of Current Registered Agent					Fee Required	
MICHELSON, STUART R ESQ 1111 KANE CONCOURSE SUITE 517 BAY HARBOUR, FL 33154			DO NOT WRITE IN THIS SPACE			
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 registered agent and title	if applicable, (NOTE: Registere	d Agent signature required	when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				00 May Be ed to Fees		
10. TITLE NAME STREET ADDRESS GITY-ST-ZIP	P FORER, DANIEL B 6815 SW 81ST TERR MIAMI, FL	STORS		03/	U00000264281 /16/05-80009-009 150.00	
TITLE NAME STREET ADDRESS CITY -ST-ZIP			g- mggggggggggggggggggg	F 100 statement and control of the c	anne and decrees	
TITLE NAME STREET ADDRESS GITY-ST-ZIP			idaning apples regarding distinctive region of	Santana	T WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			and the second s	IN THIS	SSPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Control of the Contro			
12. I hereby of indicated of the corchanged,	certify that the information supplied with this fi on this report or supplemental report is true poration or the receiver of tislee empoyed , or on an attachment with an address, with al	ling does not qualify for the exe and accurate and that my signal to execute this report as requil I other like empowered.	mption stated in Secure shall have the s red by Chapter 607	ction 119.07(3)(i), Florida same legal effect as if ma , Florida Statules; and the	Statutes. I further certify that the information de under oath; that I am an officer or director at my name appears in Block 10 or Block 11 if	