## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Jan 10, 2005 08:00 AM
Secretary of State

				_	· C		C C 4 - 4 -
DOCUMENT # 660512  1. Entity Name WHITE & BROWN, PROFESSIONAL ASSOCIATION					Sec	cretary o	n State
Principal Place 9000 SW 15 STE 102 MJAMI, FL 3	52 ST	Mailing Address 9000 SW 152 ST STE 102 MIAMI, FL 33157 US				. <b>8</b> (87) 51011 51811 57811 871	
DO NOT WRITE IN THIS SPACE				01032005 4. FEI Numbe 59-195	No Chg-P	CR2E034 (10/0	Applied For Not Applicable Additional
9000 SW 7 STE 102 MIAMI, FL	. 33157	-	IN T	NOT W	ACE		
8. 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 Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.				00 May Be			:
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD BROWN, B. MACKAY 9000 SW 152 ST, #102 MIAMI, FL	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					000000 01/10/05-	1175189 80039-022	<b>i</b> 50.00
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NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
of the corp	entify that the information supplied with this for this report or supplemental report is true poration or the receiver of trustee empowere or on an attachment with an address, with a	and accurate and that my signat d to execute this report as requir	ure shall have the si	ame legal effect.	as if made under or	ath, that I am an offic	cer or director