2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2005 8:00 am Secretary of State

04-28-2005 90219 040 ****70.00

1. Entity Nam	MENT # 720971 DE CONTRACTOR TOTAL MENTE MENTE	OCIATIO	N, INC.						04-26-20		02190		0.00
6702 N.W. 15TH AVE. 6		6702	Mailing Address 6702 N.W. 15TH AVE. MIAMI, FL 33147				•				UU6!		
2 Principal P	Place of Business	3 Maili	ing Address										
2. Principal Place of Business Suite, Apt. #, etc.		S. Walling Address					1 1840				PRIT BIRIT BY	511 BIBII BIBII AI	NICHT AL IARI
		Suite, Apt. #, etc.				042620	05	Chg-NP		CR2E0	37· (10/03)		
City & State		. City & State					4. FEI N	umber 7160	177			-	pplied For lot Applicable
Zip	Country	Zip		Cou	intry	,	5. Certifi	icate of	Status Desi	ired		\$8.75 Ac	
	6. Name and Address of Curren	ıt Registere	d Agent				7. Name	and A	ddress of N	New Reg	gistered .	Agent	
SMITH DE	R. GILBERT S.		Name										
6702 NW	15TH AVENUE . 33147				Street A	ddress (P	.O. Box N	umber	is Not Acce	ptable)			
					City						FL	Zip Co	eb
	e named entity submits this statement f	for the purpo	ose of changing its	register	ed office or	r registere	d agent, o	or both,	in the State	of Flori	da. I am	familiar with	, and accept
the obligat	tions of registered agent.												
-													
SIGNATURE		nt and title it aon	icable (NOTE	- Registere	d Agent signat	ure required v	when reinstatin	na)			DATE		
_	-	nt and title if appl			d Agent signat	rure required v	when reinstatir	ng)			DATE		
_		nt and title if appl	9. Election Car Trust Fund C	npaign F	inancing		when reinstatin \$5.00 M Added to F	May Be			ke chec	k payable tment of \$	
_	Signature, typed or printed name of registered ager		9. Election Can	npaign F	inancing		\$5.00 M Added to F	fay Be Fees	IGES TO OF	Florid	ke chec la Depar	tment of	State
SIGNATURE	Signature, typed or printed name of registered ager Filling Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D		9. Election Can	npaign F Contribut	inancing ion.	□ , AI	\$5.00 M Added to F	flay Be Fees G/CHAN		Florid	ke chec la Depar	tment of	State
SIGNATURE	Signature, typed or printed name of registered ager Filling Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D PD SMITH, GILBERT S DR.		9. Election Can Trust Fund C	npaign F Contribut 11. TIILI NAM	inancing ion.	□ A D Shar	\$5.00 M Added to F	May Be Fees B/CHAN	uson	Florid	ke chec la Depar	tment of \$	State N 10
SIGNATURE	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D PD SMITH, GILBERT S DR. 12705 N.E. 4TH AVE.		9. Election Can Trust Fund C	npaign F Contribut 11. TITLI NAM STRE	inancing ion.	□ A D Shar 6702	\$5.00 M Added to F DDITIONS On F NW	May Be Fees S/CHAN erg 15t	uson h Ave	FICERS	ke chec la Depar	tment of \$	State N 10
SIGNATURE 10. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ager Filling Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D PD SMITH, GILBERT S DR.		9. Election Can Trust Fund C	npaign F Contribut 11. TITLI NAM STRE	inancing ion. E E ET ADDRESS -ST-ZIP	D Shar 6702 Miam	\$5.00 M Added to F DDITIONS On F NW i, F	May Be Fees 6/CHAN erg 15t	uson h Ave 33147	FICERS	ke chec la Depar	tment of \$	State N 10
SIGNATURE 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D PD SMITH, GILBERT S DR. 12705 N.E. 4TH AVE. N. MIAMI, FL		9. Election Car Trust Fund C	npaign F Contribut 11. TITLI NAM STRE	inancing ion. E E E E ET ADDRESS -ST-ZIP E	D Shar 6702 Miam Anni	\$5.00 M Added to F DDITIONS ON F NW i, F	Aay Be Fees B/CHAN erg 15t L	uson h Ave 33147 n	FICERS	ke chec la Depar	RECTORS I	N 10
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SIGNATURE . 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND D PD SMITH, GILBERT S DR. 12705 N.E. 4TH AVE. N. MIAMI, FL D SMITH, TOMMIE L ELDER 475 NW 89TH ST. MIAMI, FL 33150		9. Election Can Trust Fund C	npaign F Contribut 11. TITLI NAM STRE CITY TITLI NAM STRE CITY	inancing ion. E E E E -ST-ZIP E E E ET ADDRESS -ST-ZIP	D Shar 6702 Miam D Anni 6702	\$5.00 M Added to F DDITIONS ON F NW i, F e An	Aay Be Fees G/CHAN erg 15t L gli 15t	uson h Ave 33147 n	Florid	ke chec la Depar	RECTORS I Change	N 10 Addition
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12. I hereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all gifter like empowered.

STREET ADDRESS

CITY-ST-ZIP

CICMATURE.

CITY-ST-ZIP

STREET ADDRESS 3470 NW 176 ST.

MIAMI, FL 33056

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

april 2, of (307)89+3570