


2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # F00000001138 1. Entity Name SECO SOUTH, INC.	
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Principal Place of Business 2111 34TH WAY LARGO, FL 33771	Mailing Address 2111 34TH WAY LARGO, FL 33771
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DO NOT WRITE IN THIS SPACE



01062005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3640333	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

EDWARDS, JOHN
2111 34TH WAY
LARGO, FL 33771

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MACMILLAN, ARTHUR CUMBRAE HOUSE - 15 CARLTON COURT GLASGOW G5 9JP SCOTLAND,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD CHALMERS, NICHOLAS CUMBRAE HOUSE - 15 CARLTON COURT GLASGOW G5 9JP SCOTLAND,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT CIARLEGIO, EUGENE A 351 NEW WHITFIELD STREET GUILFORD, CT 06437
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DAS O'CONNELL, PETER 351 NEW WHITFIELD STREET GUILFORD, CT 06437
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BLANTON, RANDOLPH 351 NEW WHITFIELD STREET GUILFORD, CT 06437
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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01/26/05-80080-011 150.00

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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)(f), 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:  1/19/05 (203) 458-3163
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #