

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90315 021 ***150.00

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02282005 No Chg-P CR2E034 (10/03)

4. FEI Number **33-0959408** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

**DO NOT WRITE
IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VS
NAME	FEIST, DOUGLAS L
STREET ADDRESS	12760 HIGH BLUFF DR., STE 210
CITY - ST - ZIP	SAN DIEGO, CA
TITLE	VT
NAME	CLARK, JAMES G
STREET ADDRESS	12760 HIGH BLUFF DR., STE 210
CITY - ST - ZIP	SAN DIEGO, CA
TITLE	CD
NAME	SHAUT, MICHAEL H
STREET ADDRESS	12760 HIGH BLUFF DRIVE, STE 210
CITY - ST - ZIP	SAN DIEGO, CA 92130
TITLE	PD
NAME	BALESTRI, FABRIZIO
STREET ADDRESS	12760 HIGH BLUFF DR, STE 210
CITY - ST - ZIP	SAN DIEGO, CA 92130
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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:  **DOUGLAS L. FEIST, SEC** 02/28/05 858.617.6080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #