2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 17,.2005 08:00 AM

1. Entity Na THE GA	JMENT # F0400000674 IMPORTANCY, INC. Acce of Business Mailing Address		Secretary of State
2132 DATE PALM WAY VENICE, FL 34292 2132 DATE PALM WAY VENICE, FL 34292 VENICE, FL 34292			THE STATE OF CHESTRA WITH BEHIND BEHIND WHITH WENT WENT BEHIND HER STATE OF THE STA
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent		01282005 No Chg-P CR2E034 (10/03) 4. FEI Number	
GARDINER, ALEXANDER 2132 DATE PALM WAY VENICE, FL 34292			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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when rematalling) DATE			
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. TITLE	OFFICERS AND DIRECTORS		
NAME STREET ADDRESS CITY-ST-ZIP	GARDINER, ALEXANDER 2132 DATE PALM WAY VENICE, FL 34292		U08000232690 02/17/05-80011-023 150.80
TITLE NAME STREET ADDRESS CITY-ST-ZIP			0671170077901117023 150,60
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	in the second		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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: 4 Cardina 2 - 16 - 200 5 941 412 0432			