2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2005 08:00 AM Secretary of State DOCUMENT # F40312 1. Entity Name SQUIRES INTERNATIONAL, INCORPORATED Principal Place of Business 🛬 Mailing Address 171 S BANANA RIVER DR 1840 BALDWIN AVE MERRITT ISLAND, FL 32952 ROCKLEDGE, FL 32955 03282005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KIRSCHNER, NEAL A DO NOT WRITE 1840 BALDWIN AVE #10 ROCKLEDGE, FL 32955 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 it applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DP TITLE NAME KIRSCHNER, NEAL A U00000305677 STREET ADDRESS 1840 BALDWIN AVE #10 04/14/05-80094-008 150.00 CITY-ST-ZIP ROCKLEDGE, FL 32955 TITLE STREET ADDRESS CITY - ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filling 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 507, 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:

CITY - ST - ZIP

Meufa Kuschun Neal A Kirschner

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