2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE CONTROL OF SIGNING OFFICER OR DIRECTOR

Apr 15, 2005 08:00 Al Secretary of State  Apr 16, 2005 08:00 Al Secretary of State  Apr 16, 2005 18:00 Al Secretar	Apr 15, 2005 08:00 Secretary of State  Apr 15, 2005 08:00	_	ANNUAL	REPORT (AR	<u> </u>	_ FILED	
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Country   Suite, Apt #, etc.	EGOLO NEWBERRY ROAD GAINESVILLE FL 32607  CANNESVILLE FL 32608  2. Principal Place of Business  Surio, Apt. #, etc.  Surio, Apt. #, etc	TOBA M.	SMITH, P.A.			Secretary 0	1 State
GAINESVILLE FL 32607 US  Salte	GAINESVILLE FL 32607 US  2. Principal Place of Business . 3. Mailing Address  Suite, Apt #, 6ltc . Suite, Apt #, eltc . 1st MOORE CR2E034 (10/04)  City & State . City & State . City & State . A. FEI Number . Sp-2207419 . Applied F. Not Applied F. Storage . See . Certificate of Status Centred . See . Required . See . Required . See . Certificate of Status Centred . See . Required . See . Certificate of Status Centred . See . Required . See . Certificate of Status Centred . See . Required . See . Certificate of Status Centred . See . Certificate of Status . Centred . See . Certificate of Status . See . Certificate . See	Principal Plac	ce of Business	Mailing Address			
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City & State  Country  Country  S. Certificate of Status Desired  S8.75 Additional Fee Required Fee Req	City & State  Country  Coun	2. Principal F	Place of Business	3. Mailing Address			
Zip Country Zip Country S. Certificate of Status Desired S. 8.75 Additional Sea Recuired  S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name  SMITH, TOBA M. 10424 SW 41 ST PLACE GAINESVILLE FL 32608  City FL Zip Code  8. The above hamed 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 Supplus pased or period are of impated agent and the flustration (NOTE Registered Agent segretate equal to the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  FILE NOW!! FER IS \$150.00  After May 1, 2005 Fee Will Be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS 111.  ITTLE PVS  NMM SMITH, TOBA M  SMI	Sp. 2207419   Not Applied   Sp. 75	Suite, Apt	#, etc.	Suite, Apt. #, etc.		1st MOORE CR2E034 (10/	04)
Signature   Survive   Su	Zip   Country   Zip   Country   St. Certificate of Status Desired   \$8.75 Additional Fee Pequitored   \$8.75 Additional Fee Pequitored Agent   \$8.75 Ad	City & Stat	te	City & State		4. FEI Number 59-2207419	
6. Name and Address of New Registered Agent  SMITH, TOBA M. 10424 SW 41 ST PLACE GAINESVILLE FL 32608  City  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee Will Be \$550.00  After May 1, 2005 Fee Will Be \$50.00  Additional Street Address (P.O. Box Number is Not Acceptable)  9. Election Campaign Financing \$5.00 May Be Added to Fees Will Be \$50.00  Added to Fees Will Be \$50.00  Additional Street Address (P.O. Box Number is Not Acceptable)  9. Election Campaign Financing \$5.00 May Be Added to Fees Will Be \$50.00  Add to Fees Will Be \$50.00	SMITH, TOBA M. 10424 SW 41 ST PLACE GAINESVILLE FL 32608  Cay  Cay  FL Zip Code  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 act the obligations of registered agent.  SIGNATURE  Surden types or printed square of plays agent agent and like if applicable.  FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will Be \$550.00  Make Check Payable to Florida Department of State  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III.  MAMI SIRITI ADDRESS  OIY 51-2P  INTE  MAME SIRITI ADDRESS  OIY 51-2P  INTE  Delete  INTE  OIT 51-2P  INTE  OI	Zip	Country	Zip	Country		5 Additional
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City   FL   Zip Code	10424 SW 41 ST PLACE   Sheet Address (P.O. Box Number is Not Acceptable)			· · · · · · · · · · · · · · · · · · ·	Name	- · ·	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE Survive. Nyadi or printed name of registered agent and tills if applicable (NOTE. Registered Agent synature required when reinstating)  FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee Will Be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  INTE  PVS  SMITH, TOBA M  SIREIT ADDRESS  CITY ST-2P  GAINESVILLE FL  Delete  INTE  NAME  SIREIT ADDRESS  CITY ST-2P  INTE  Change Addition  Addition  Addition  NAME  SIREIT ADDRESS  CITY ST-2P  INTE  Change Addition  Change Addition  NAME  SIREIT ADDRESS  CITY ST-2P  INTE  Change Addition  NAME  SIREIT ADDRESS	8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent.  SIGNATURE Submits And Advanced Registered Agent agent agent and the if approach in the interpretation (NOTE Registered Agent	104	24 SW 41 ST PLACE		Street Address	s (P.O. Box Number is Not Acceptable)	
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4-10-05 3D-574-668
Date Phone 1