2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCU 1. Emity Nan RONALE		0			Secret	ary of State
209 SOUDA	N AVENUE a	ailing Address O9 SOUDAN AVENUE ORONTO, ON m4s-1w2 CA		 	NN 1889 9000 8000 8000 800	7 KANAN JURKAN DILIKE KAJUKAN ILI TANSI
DO NOT WRITE IN THIS SPACE			CE	04142005 N	o Chg-P CR2	E034 (10/03) Applied For
				98-0081169		Not Applicable
	6. Name and Address of Current Regis		5. Certificate of Sta		Fee Required	
KETCHAM, RODNEY S 1980 NORTH ATLANTIC AVE., STE 918 COCOA BEACH, FL 32931			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 reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **Trust Fund Contribution.**				.00 May Be ad to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEIBEL, QUEENIE 500 AVENUE RD. APT 1006 TORONTO, ONTARIO, CA m4v2j6	TORS	Makanan d	f)4	U000003324 /26/05-9009	65 9-012 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEIBEL, ROBIN 209 SOUDAN AVE TORONTO, ONT, CA m4s1w2		i ya'uli Yasa ya Ya	karon mel giyamidi.		ार्च ४ - जिल्हे निवर - से विश्वकार से क्रिकेट
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indicated of the cor	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered, or on an attachment with an address, with all	nd accurate and that my signat I to execute this report as requir	ure shali have the s	same legal effect as if r	nade under oath; that	I am an officer or director