2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 8:00 am Secretary of State

Principal Place of Business Sylf N KENDAL OR	1. Entity Nam	MENT # G87487 LIC CENTERS, INC.			04-18-2005 90310 026 ***150.00						
SUIT 8 805 E MIMMAI, FL 33176 Amaling Address	Principal Place of Business Mailing Address							50036 3	125		
Application	8940 N. KEN	DALL DR.								•	
2. Principal Place of Business 7867 Kendall Drive Site April 9 or Site April 9											
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Solid August Solid Sol	7867 K	endall Drive	1867 Kendall DK								
City & State of Find Address of North Acceptable of September Agent agreement for the purpose of changing its registered Agent or both, in the State of Findia. I am lamiliar with, and accept the obligations of registered agent. City FL Zip Code	Suite Apt. #, etc. #100		Suite, ADI, #, etc.			04132005	Chg-P	CR2E034 (10	/03)	•- •	
8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Name Name Name Name Street Address (P.O. Box Number is Not Acceptable) S			City & State		4						
Name and Address of Current Registered Agent	Zip 2315	Country		Country	5	5. Certificate	of Status Desired			ional	
MARKS, ALLAN B. 7825 S.W. 48 COURT #900 MIAMI, FL 33143 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. Tem familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOWITI FEE IS \$15.0.0 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE WEISMAN, PETER N. 8940 N. KENDALL DR. WEISMAN, PETER N. 8940 N. KENDALL DR. OFFICERS AND DIRECTORS TITLE NAME SITERI ADDRESS CITY-51-2P TITLE NAME SITERI ADD	3313				7	Name and	Address of New F		equirea		
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#900 MIAMI, FL 33143 City FL Zip Code					Street Address (P.O. Box Number is Not Acceptable)						
8. The above named antity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent. SIGNATURE Signature Signatu											
B. The above named ontity 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 pretize name of registered agent and title # applicable. PATE: Registered Agent expeature received sheen consisting? After May 1, 2005 Foe will be \$550.00 9. Election Campaign Financing Added to Fees Added t	MIAMI, FL 33143										
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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 abdress, with all other like empowered.

GNATURE:

| Continued in the information stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indic

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