2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 10, 2005 8:00 am Secretary of State

DOCUMENT # H24526 1. Entity Name VICTOR SIEGEL, C.P.A., P.A.					02-10-2005 90058 040 ***150.00			
Principal Place of Business Mailing Address			· · · · · · · · · · · · · · · · · · ·)00	13411
14275 SW 73RD AVENUE #415		14275 SW 73RD AVENUE #415						
	AY, FL 33158 US	PALMETTO BAY, FL 3315	S8 US		 	I Biil Bibli Bibli Bibli Bibli Bibli	EIOLL DIOL	
Principal Place of Business 14275 SW 73RD AVENUE		3. Mailing Address 14275 SW 73RD AVENUE						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02072005	Chg-P	CR2E034 (1	0/03)	
City & State PALMETTO BAY, FL		City & State PALMETTO BAY, FL		4. FEI Numb 59-245				olied For Applicable
Zip 331 58	Country US _	3 ² 31.58	Country US	5. Certificate	of Status Desire		5 Addi	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of Ne	w Registered Agent		
SIEGEL, LORETTA				Name				
14275 S.W. 73RD AVENUE PALMETTO BAY, FL 33158			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
				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 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								•
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	i Financing ution.	\$5.00 May Be Added to Fees		· · · · · · · ·	***	• .	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	/CHANGES TO (OFFICERS AND DIRE	CTORS	3IN 11
TITLE	DP SIEGEL, VICTOR	☐ Defete	TITLE NAME			□ (Change	☐ Addition
STREET ADDRESS	14275 SW 73RD AVENUE		STREET ADDRESS					
CITY-ST-ZIP	PALMETTO BAY, FL		CITY-ST-ZIP					
TITLE NAME	ST SIEGEL, LORETTA	☐ Delete	TITLE NAME				Change	☐ Addition
STREET ADDRESS	14275 SW 73RD AVENUE		STREET ADDRESS					
CITY-ST-ZIP	PALMETTO BAY, FL 33158		CITY-ST-ZIP					
TITLE		Delete	NAME			Ш	Change	Addition
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP		П м.н.	CITY-ST-ZIP TITLE				Change	Addition
NAME	•	☐ Delete	NAME			، ب	awnye	Audition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY+ST-ZIP					
TITLE		Delete	TITLE				Change	☐ Addition
NAME		CT DEIGIC	NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS City-St-Zip					
TITLE		☐ Delete	TITLE				 Change	☐ Addition
NAME			NAME CTREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS City-St-Zip					

12. I hereby 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 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: VICTOR SIEGEL 2/6/2005 (305) 255-7224