2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2005
Secretary of State

DOCUMENT# J06381

Entity Name: BENEFICIAL PRODUCTS, INC.

Current Principal Place of Business:

7425 WILLOW WISP DR. WEST
LAKELAND, FL 33810

New Principal Place of Business:

Current Mailing Address:

% JAMES F. GATES
P. O. BOX 290311
TAMPA, FL 33687

New Mailing Address:

FEI Number: 59-2661610 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GATES, JAMES F.
7425 WILLOW WISP DR. WEST
LAKELAND, FL 33810 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	GATES, JAMES F.,	
Address:	7425 WILLOW WISP DR. WEST	
City-St-Zip:	LAKELAND, FL	
Title:	VP	( ) Delete
Name:	GATES, SEAN	
Address:	8730 SPRINGTREE DRIVE	
City-St-Zip:	TAMPA, FL 33657	
Title:	T	( ) Delete
Name:	GATES, JAMES F	
Address:	7425 WILLOW WISP DR WEST	
City-St-Zip:	LAKELAND, FL	
Title:	S	( ) Delete
Name:	GATES, SEAN T	
Address:	8730 SPRING TREE DRIVE	
City-St-Zip:	TAMPA, FL 33637	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES F. GATES PRES 05/06/2005

Electronic Signature of Signing Officer or Director — Date