
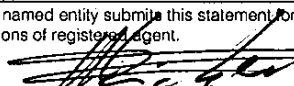
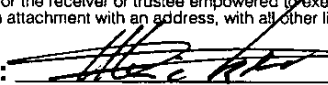


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90354 028 ***158.75

DOCUMENT # J45166 1. Entity Name H. MAX FRICKER & ASSOCIATES, INC.																											
Principal Place of Business 11300 US HIGHWAY ONE SUITE 203 NORTH PALM BEACH, FL 33408-3208 US		Mailing Address 11300 US HIGHWAY ONE SUITE 203 NORTH PALM BEACH, FL 33408-3208 US																									
2. Principal Place of Business 2401 PGA Blvd. Suite, Apt. #, etc. 148		3. Mailing Address 2401 PGA Blvd. Suite, Apt. #, etc. 148																									
City & State Palm Beach Gardens, FL		City & State Palm Beach Gardens, FL																									
Zip 33410		Country USA																									
4. FEI Number 59-2744360		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired XX		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent FRICKER, H. MAX 11300 U.S. HIGHWAY ONE, SUITE 203 STE 203 NORTH PALM BEACH, FL 33408		7. Name and Address of New Registered Agent Name H. Max Fricker Street Address (P.O. Box Number is Not Acceptable) 2401 PGA Blvd., Suite 148 City Palm Beach Gardens FL Zip Code 33410																									
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:  H. Max Fricker 3-15-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PD</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>FRICKER, H. MAX</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>11300 U.S. HIGHWAY ONE, SUITE 203</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NORTH PALM BEACH, FL</td> <td></td> </tr> </table>		TITLE	PD	<input type="checkbox"/> Delete	NAME	FRICKER, H. MAX		STREET ADDRESS	11300 U.S. HIGHWAY ONE, SUITE 203		CITY-ST-ZIP	NORTH PALM BEACH, FL		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PD</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>H. Max Fricker</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2401 PGA Blvd., Suite 148</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Palm Beach Gardens, FL 33410</td> <td></td> </tr> </table>		TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	H. Max Fricker		STREET ADDRESS	2401 PGA Blvd., Suite 148		CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
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12. 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 address, with all other like empowered.																											
SIGNATURE:  H. Max Fricker <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3-15-05 561-625-1005 <small>Date Daytime Phone #</small>																									

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03032005 Chg-P CR2E034 (10/03)