2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 8:00 am Secretary of State 05-02-2005 90556 027 ***150.00

DOCUMENT # J65007 1. Entity Name LIST HOLDINGS, INC.				:	05-02-2005 9	90556 027 *	**150.00
Principal Place 223 SUNSET STE 110 PALM BEACH		Mailing Address 223 SUNSET AVE #110 PALM BEACH, FL 33480 L	is				
DO NOT WRITE IN THIS SPA			CE	03152005 4. FEI Numbe 59-2797	No Chg-P	CR2E034 (
	6. Name and Address of Current Re				— Fee	Required	
LIST, MARTIN A. 223 SUNSET AVE STE 110 PALM BEACH, FL 33480					NOT W		
the obligat	named entity submits this statement for the consort registered agent.		ed office or registe		n, in the State of Flor	rida. I am famil	iar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				.00 May Be led to Fees		-	-
10. TITLE NAME STREET ADDRESS	OFFICERS AND DI VSD LIST, CYNTHIA S 223 SUNSET AVE STE 110	RECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PALM BEACH, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

AGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

L155

4/27/05

Daytime Phone #