2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 23, 2005 08:00 AM Secretary of State

ANNUAL REPORT				Feb 23, 2005 08:00 A		
1. Entity Nan	MENT # J65545 ne EBA INC.				Sec	retary of State
15330 LBJ FWY		Mailing Address PO BOX 496029 GARLAND, TX 75049-6029 Ú	JS			
С	OO NOT WRITE I		CE	02072005 4. FEI Numb 59-198	No Chg-P	CR2E034 (10/03) Applied For Not Applied Service Service Required
	6. Name and Address of Current Rec	Istered Agent				
DOYLE, PATRICK W. 800 WEST MORSE BLVD., SUITE 1 WINTER PARK, FL 32789			DO NOT WRITE IN THIS SPACE			
	e named entity submits this statement for the tions of registered agent.	purpose of changing its register	ed office or register	ed agent, or bo	oth, in the State of Flo	rida I am familiar with, and accept
SIGNATURE.		de if applicable (NOTE Registers	:- :d Agant signature required	when reinstating)	<u>:</u>	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finant Trust Fund Contribution.				00 May Be ed to Fees	1/00000 02/23/05-	0240251 -80023-019 150.00
10.	OFFICERS AND DIR	ECTORS	<u> </u>		·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALBADA-JELGERSMA, ERIC OUDE GRÄCHT 182 BRASSCHART B2930 BELGIUM,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ALBADA-JELGERSMA, FRITS 15330 LBJ FWY #418 MESQUITE, TX 75150					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MACKAY, JOHN D. L. 650 W GEORGIA ST 21ST FLOOR VANCOUVER, BC v6b4n7	-	·	DO	NOT W	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SAUNDERS, RODERICK G. 650 W GEORGIA ST 21ST FLOOR VANCOUVER, BC v6b4n7			IN	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,				
TITLE NAME STREET ADDRESS						

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 usetee 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;

SONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb it 2 to 1

604-687-1919