
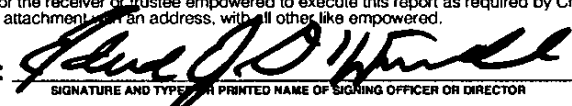


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 14, 2005 8:00 am**  
**Secretary of State**

07-14-2005 90078 018 \*\*\*550.00

<b>DOCUMENT # K39025</b> 1. Entity Name <b>EDWARD J. O'DONNELL, P.A.</b>																																			
Principal Place of Business <b>3050 BISCAYNE BLVD. SUITE 1000 MIAMI, FL 33137</b>		Mailing Address <b>3050 BISCAYNE BLVD. SUITE 1000 MIAMI, FL 33137</b>																																	
2. Principal Place of Business <b>2800 BISCAYNE BLVD</b> Suite, Apt. #, etc. <b>Suite 520</b> City & State <b>MIAMI, FLORIDA</b> Zip <b>33137</b>		3. Mailing Address <b>2800 BISCAYNE BLVD</b> Suite, Apt. #, etc. <b>Suite 520</b> City & State <b>MIAMI, FLORIDA</b> Zip <b>33137</b>																																	
4. FEI Number <b>65-0080545</b>		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent  <b>O'DONNELL, EDWARD J. 3050 BISCAYNE BLVD. SUITE 1000 MIAMI, FL 33137</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>2800 BISCAYNE BLVD</b> <b>SUITE 520</b> City <b>MIAMI</b> FL Zip Code <b>33137</b>																																	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																			
<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>		9. Election Campaign Financing <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:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> <b>PD O'DONNELL, EDWARD J. 3050 BISCAYNE BLVD., SUITE 1000 MIAMI, FL 33137</b> <input type="checkbox"/> Delete         </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD O'DONNELL, EDWARD J. 3050 BISCAYNE BLVD., SUITE 1000 MIAMI, FL 33137</b> <input type="checkbox"/> Delete															11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> <b>? EDWARD J. O'DONNELL 2800 BISCAYNE BLVD, # 520 MIAMI, FL 33137</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>? EDWARD J. O'DONNELL 2800 BISCAYNE BLVD, # 520 MIAMI, FL 33137</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition														
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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: 		7-12-05 (305) 573-6000 Date Daytime Phone #																																	