## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 28, 2005 08:00 AM **DOCUMENT # L13709 Secretary of State** 1. Entity Name THE MICA SHOP INC. Principal Place of Business Mailing Address 364 SW 4 CT 180 BERTON DR LAKE PLACID, FL 33852 US DANIA, FL 33004 No Chg-P CR2E034 (10/03) 02092005 DO NOT WRITE IN THIS SPACE Applied For 4. Et Number 65-0146252 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BETHAN, MICHAEL J. DO NOT WRITE 364 SW 4TH CT, SUITE 2 **DANIA, FL 33004** IN THIS SPACE 3. 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Àdded to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE U0U0UU339851 04/28/05-80093-018 150.00 NAME BETHAN, MICHAEL 364 SW 4TH CT 2 STREET ADDRESS CITY - ST - ZIP DANIA, FL TITLE VERONICA, BETHAN NAML 364 SW 4TH CT 2 STREET ADDRESS DANIA, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CUTY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY -ST-ZIP nne NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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

GRATURE AND TYPED OR PRINTED NAME OF SIGHING OFFICER OR DIRECTOR

FILED