2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 08:00 AM Secretary of State

305) 216-3504

1. Entity Name	MENT # L23592 ol service, inc.	·			Secretary of State	
Principal Place 20021 NW 46 CORAL CITY, I		Mailing Address 20021 NW 40TH AVE CORAL CITY, FL 33055-1366	. :		<u></u>	
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				03292005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 65-0168332 Not Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required		
20021 NW	JR, RAYMOND 40TH AVE TY, FL 33055	TO SERVICE TO SERVICE	DO NOT WRITE IN THIS SPACE			
the obligation of the state of	signature, typed or printed name of registered agent E NOWIII FEE IS \$150.00	and little if applicable. (NOTE. Registero 9. Election Campaign Finar	d Agent signature required	1	h, in the State of Florida. I am familiar with, and a	cept
After Ma	ay 1, 2005 Fee will be \$550.	·	. · · · · · · · · · · · · · · · · · · ·	fed to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DPT RAYMOND, CINTRON JR 20021 NW 40TH AVE CAROL CITY, FL 33055	DIRECTORS			110000000 3371	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			<u> </u> 		U00000312371 04/18/05-80080-025 150.0	18
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE THIS SPACE	
NAME STREET ADDRESS CITY ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP	di, bha bha isian air	c N. S.		testing 440 DZM	Fig. Elocido Statuto I fuebra conticulo de la cincia	otlon
indicated of the cor changed	cerniy that the information supplied wit on this repert or supplemental report poration or the receiver or trustee emp one an attachment with an address,	is true and accurate and that my signa sowered to execute this report as requ	emption stated in Stature shall have the litred by Chapter 60	i same legal effe 17. Florida Statut	(i), Florida Statutes. I further certify that the information at as if made under oath, that I am an officer or direct and that my name appears in Block 10 or Blo	ector k 11 if

PLET DE FILL MANE OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: