2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 25, 2005 8:00 am Secretary of State DOCUMENT # L34509 1. Entity Name 04-25-2005 90223 015 \*\*\*150.00 RICHARD PROSPECT, P.A. Principal Place of Business Mailing Address 3925 S NOVA ROAD 3925 S NOVA ROAD SUITE 2 DAYTONA BEACHEL 32127 DAYTONA BEACH FL 32127 2. Principal Place of Business 3. Mailing Address 2570 W. International Speedway Blvd. Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Suite 230 City & State City & State Applied For 4. FEI Number 59-2978535 Daytona Beach, FL 32114 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PROSPECT, RICHARD Street Address (P.O. Box Number is Not Acceptable) 2570 W. International Speedw 3925 S NOVA ROAD International Speedway Blvd. SUITE DAYTONA BEASH FL 32127 Dáytona Beach 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THILE D TITLE ☐ Delete Change Addition PROSPECT, RICHARD NAME NAME STREET ADDRESS 3925-S NOVA ROAD SULTE 21 2570 W. International Speedway Blvd. STREET ADDRESS DAYTONA BEACHEL 32127 CITY-ST-ZIP CITY-ST-ZIP Suite 230 Daytona Beach, FL 32114 TITLE Delete \_ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-7IP Delete TITLE TITLE Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE > T(T) F Change ☐ Addition NAME NAME STREET ADDRESS 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)(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 of 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.

FILED

4-18-05

Daytime Phone #