2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT	# L62600
1. Entity Name	
EDWARD DE R. C	AYIA. P.A.

Principal Place of Business C/O EDWARD DE R. CAYIA 432 N.E. 3RD AVENUE FORT LAUDERDALE, FL 33301

SIGNATURE:

Mailing Address

C/O EDWARD DE R. CAYIA 432 N.E. 3RD AVENUE FORT LAUDERDALE, FL 33301

		811)) B) 81	

C	O NOT WRITE I	N THIS SPA	CE	4. FEI Number 65-019	er	UNZEL	Applied For Not Applicable		
				. !!	of Status Desired		\$8.75 Additional Fee Required		
	6. Name and Address of Current Regis	tered Agent	I						
CAYIA, EDWARD DE R. 432 N.E. 3RD AVENUE FORT LAUDERDALE, FL 33301				ب بالماماماماماما بالداد	NOT W THIS SP	أأنؤة فيؤفرون	0151		
8. The above the obligat	named entity submits this statement for the plans of registered agent.	ourpose of changing its register	red office or reg	Istered agent, or bo	th, in the State of Flo	rida. Iam	amiliar with, and accept		
	Signature, typed or printed name of registered agent and lifle	řappikable. (NOTE; Řegister	od Agent signature fei	quired when reinstating)		DATE	· · · · · · · · · · · · · · · · · · ·		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	OTORS	kinis sisisis						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CAYIA, EDWARD DE R. 432 N.E. 3RD AVENUE FORT LAUDERDALE, FL				(/)0000 01/29/05	209408 81178	013 150, M		
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					THIS SF	ACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. I hereby of indicated of the corporation changed,	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ling does not qualify for the exe and accurate and that my signs to execute this report as requi other like empowered.	emption stated in ture shall have ired by Chapter	n Section 119.07(3)(i the same legal effect 607, Florida Statute	i), Florida Statutes. I t as if made under o s; and that my name	further cert ath; that I a appears in	ify that the Information in an officer or director Block 10 or Block 11 if		