2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED May 06, 2005 8:00 am Secretary of State

DOCU 1. Entity Nam	MENT # 665	78		3	y of State 095 026 ***150.00	
FU	to Com Kecy L	ER, INC.				
Principal Plac	ce of Business	Mailing Address		- 	50050	0.00
150220, ABAR == ZAME					9696 **********************************	UZJ Marian
DEC	RAY BEACH, FL 335	, 144				
2. Principal F	Place of Business S.W. 4th AVE	3. Mailing Address S Amb f	(212)			
Suite, Apt.		Suite, Apt. #, etc.	+3 (0)	1st MOORE	CR2E034 (10/04))
City & Stat	AY BEACH, FL 33444	City & State		4. FEI Number (5-0190	896	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desir	Fee Requ	Additional uired
	6. Name and Address of Current I	Registered Agent	Name	7. Name and Address of N	ew Registered Agent	
J BY 13 ENTER						
Street			Street Addre	ddress (P.O. Box Number is Not Acceptable)		
T 1730 S. Federal Hwy #299 Delray-Beach, EL 33483						
Dellay_Iscaciit.			City	y FL Zip Code		
8. The above	e named entity submits this statement for tions of registered agent.	the purpose of changing its re	gistered office or regi	stered agent, or both, in the State	of Florida. I am familiar w	ith, and accept
	auno di regioterea again.					
SIGNATURE .	Signature, typed or printed name of registered agent a	od Ide J emboshin (AFATE D	legistered Agent signature req		DAY!	
		TO THE P CASE OF THE P	edizieleg võele siõusinie led	ured when reinstating)	DATE	
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After	ILE NOW!!! FEE IS \$150.00 May 1, 2005 Fee Will Be \$550.00	State	egoreed Agent signsture req	9. Election C	ampaign Financing \$	dded to Fees
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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 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 apprecia, with all effect in the empowered.

SIGNATURE:

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4/27/05