## 2005 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # L83679**

**FILED** Feb 07, 2005 08:00 AM Secretary of State

BRIAN P. RUSH, P.A. Principal Place of Business\_ Mailing Address 3411 W. FLETCHER AVE 3411 W. FLETCHER AVE SUITE B SUITE B TAMPA, FL 33618 TAMPA, FL 33618



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

02042005 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number

65-0198903 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П

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RUSH, BRIAN P. 3411 W. FLETCHER AVE.		}	DO NOT WRITE
SUITE B TAMPA, FL 33618	*		IN THIS SPACE

8. The above the obligat	named entity submits this statement for the p ions of registered agent	urpose of changing its registers	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am famillar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title i	applicable (NOTE: Registered	d Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	- U900RQ21R297
10.	OFFICERS AND DIREC	CTORS			02/07/05-80059-013 150.00
NAME STREET ADDRESS CITY-ST-ZIP	D RUSH, BRIAN P 3411 W. FLETCHER AVE., B TAMPA, FL 33618		, 		
TITLE NAME STREET ADDRESS CITY-SY-ZIP		• = "			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby o	certify that the information supplied with this file	ling does not qualify for the exer	motion state	d in Section 119.07(3)	(i), Florida Statutes. I further certify that the information

Thereby certay that the minimation supplied with this many does not quality for the exemption stated in Section 119.07 (S)(I), Florida Statutes. 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 eath; 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.

SIGNATURE: