2005 FOR PROFIT CORPORATION ANNUAL REPORT

EIGNATURE AND TYPED AR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 16, 2005 08:00 AM Secretary of State

305-252-4988 Daytime Phone #

ANNUAL REPORT				
DOCUMENT # M56409 1. Entity Name CAPT. BOB LEWIS, INC.				Secretary of Stat
Principal Place 13273 SW 1 MIAMI, FL 3	124 STREET	lailing Address 13273 SW 124 STREET MAMI, FL 33186 US		
DO NOT WRITE IN THIS SPACE 5. Name and Address of Current Registered Agent				01032005 No Chg-P CR2E034 (10/03) 4. FEI Number
LEWIS, JUDITH B 13273 SW 124 ST MIAMI, FL 33186				DO NOT WRITE IN THIS SPACE
8. The above named entity submills this statement for the purpose of changing its registered office or registered the obligations of registered agent. SIGNATURE Signature, lypod or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution.				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VSTP LEWIS, JUDITH B. 13273 SW 124 ST MIAMI, FL	TORS		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP		;		IN THIS SPACE
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS				
12. I hereby certify that the information supplied with this filing 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 address, with all other like empowered.				