2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 13, 2005 08:00 AM Secretary of State

| 1. Entity Nam WAREHO | DUSE SERVICES, INC. e of Business //EW DR | Mailing Address 3504 WESTVIEW DR NAPLES, FL 34104 US | | * | | eretary of State |
|--|--|--|----------------------------|--|---------------------|---|
| D | 6. Name and Address of Current Re | | CE | 01042005 4. FEI Numb 65-006 5. Certificate | | CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required |
| PYTLIK, KIM M. 173 WEST ST NAPLES, FL 34108 | | | DO NOT WRITE IN THIS SPACE | | | |
| SIGNATURE Signature, typod or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) PLE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | | | | | |
| 10. | OFFICERS AND DI | RECTORS | <u> </u> | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | P PYTLIK, PETER J. 173 WEST ST NAPLES, FL ST PYTLIK, KIM M. 173 WEST ST NAPLES, FL | | | | U00000 01/13/05- | 179615 80024-020 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT W | RITE |
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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 of divises empowered to execute this apput 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 the empowered. | | | | | | |
| SIGNATURE: Peter S Y411 1/7/05 239)43:3396 | | | | | | |