

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008213

FILED  
Mar 05, 2005  
Secretary of State

Entity Name: BODIES UNDER CONSTRUCTION, INC.

**Current Principal Place of Business:**

619 N 21ST AVE  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 814743  
HOLLYWOOD, FL 330814743

**New Mailing Address:**

FEI Number: 41-2066383

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CUMMINGS, MARK ANGELO  
4107 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

CUMMINGS, MARK ANGELO  
619 N. 21 AVE.  
HOLLYWOOD, FL 33020 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARK ANGELO CUMMINGS

03/05/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CUMMINGS, MARK ANGELO  
Address: 3901 S. OCEAN DR. APT 16-L  
City-St-Zip: HOLLYWOOD, FL 33019

Title: ST ( ) Delete  
Name: CUMMINGS, VIOLETTA  
Address: 3901 S. OCEAN DR. APT 16-L  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D ( ) Delete  
Name: BRAVER, BETH R MD  
Address: 3700 WASHINGTON ST STE 500  
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CUMMINGS, MARK ANGELO  
Address: 619 N 21 AVE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: ST (X) Change ( ) Addition  
Name: CUMMINGS, VIOLETTA  
Address: 619 N. 21 AVE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK ANGELO CUMMINGS

PD

03/05/2005

Electronic Signature of Signing Officer or Director

Date