2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 27, 2005 8:00 am Secretary of State

1. Entity Nam	MENT # N03158 ing place, inc.	,					01-27-2005	5 90048 0	26 ****61	1.25
Principal Place of Business 2401 W. CYPRESS CREEK ROAD FT. LAUDERDALE, FL 33309 Mailing Address 2401 W. CYPRESS CREEK RO FT. LAUDERDALE, FL 33309 FT. LAUDERDALE, FL 33309						h desprises out o	400075		Tri Gibil Birli bir	PINI DI BERDE
2. Principal P	Place of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01112005	Chg-NP	CR2E0	37 (10/03)	
City & State		City & State				4. FEI Number 59-2421			1	oplied For
Zip Country		Zip Co		untry	5. Certificate of Status Desired			\$8.75 Add	ditional	
	6. Name and Address of Current	Registered Agent	I	T		7. Name and	Address of New	Registered		
541//0 14/	NDV T			Name			,			
	ARK I YPRESS CREEK ROAD ERDALE, FL 33309			Street A	ddress (f	P.O. Box Number	is Not Acceptab	ole)		
				City				FL	Zip Cod	e
	named entity submits this statement folions of registered agent.	or the purpose of changing	its register	ed office of	r register	ed agent, or both	, in the State of F	Florida. I am	familiar with,	and accept
SIGNATURE .										
SIGNATORE.	Signature, typed or printed name of registered agent	and title if applicable. (N	OTE: Registere	ed Agent signat	ure required	when reinstating)		DATE		
old NATOTIE :	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2005	9. Election C		Financing	ure required	\$5.00 May Be Added to Fees		Make chec	k payable t	
10.	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DI	9. Election C Trust Fund	ampaign F	Financing tion.		\$5.00 May Be	Fic	Make chec orida Depai	tment of S	tate
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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 617, 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:

GINATURE AND TYPED OF PRINTED PRINE OF BIGNING OFFICER OR DIRECTOR

1.12.05

<u> 964-315-4315</u>