2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 06, 2005 08:00 AN Secretary of State

1. Entity Nam	MENT # P00000074				cury of state	
-	e of Business ERRACE NORTH 33458	Mailing Address P.O. BOX 1151 JUPITER, FL 33468				
DO NOT WRITE IN THIS SPAC				05042005 No Chg-P CR2E034 (10/03) 4. FEI Number		
	6. Name and Address of Current Re MAYLENE FERRACE NORTH FL 33458	DO NOT WRITE IN THIS SPACE				
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
	LE NOW!!! FEE IS \$550.00 ue by September 7, 2005		00 May Be ed to Fees			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AUMAUK, MAYLENE 19594 66 TERRACE NO. JUPITER, FL 33458	RECTORS	_		<u>.</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		to the second			05/06/05-80	64112 027-016 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ئے تار میں میں میں میں میں می ں میں میں میں ا				NOT WR	
NAME STREET ADDRESS CITY-ST-ZIP		<u></u>		IN 7	THIS SPA	ICE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · ·	<u> </u>		·		
12. I hereby of indicated of the corrections of the	erlify that the information supplied with the on this report or supplemental report is troporation or the receiver or trustee empower on an attachment with an address, with	is filing does not qualify for the exe ue and accurate and that my signa ered to execute this report as requi n all other like empowered.	mption stated in Se- ture shall have the s red by Chapter 607	ction 119.07(3)(i) same legal effect , Florida Statutes	, Florida Statutes. I fun as if made under oath ; and that my name ap	ther certify that the information that I am an officer or director pears in Block 10 or Block 11 if

Maylene Aumick

SIGNATURE: