## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005 08:00 AM
Secretary of State

1. Entity Nam	MENT # P00000154	5 <sup>8</sup> 8			Secretary of State
1777 SOUTH	e at Business 1 NOVA ROAD ONA, FL 32119	Mailing Address 1777 SOUTH NOVA ROAD SOUTH DAYTONA, FL 32119			WIN BUNK BUNK BURK KARA KARA WINI WININ DINAN DINAN KANDAN KANDAN KANDAN
DO NOT WRITE IN THIS SPAC			CE	04272005 No C  4. FEI Number 59–3637780  5. Certificate of Status	Applied For Not Applicable
	6. Name and Address of Current Re WN B TH NOVA ROAD AYTONA, FL 32119	jistered Agent		,	T WRITE S SPACE
The above named entity submits this statement for the purpose of changing his 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 time if applicable. (NOTE: Registered Agent agent agent are required when renstating)  OATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees					
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DIE DVS SELF, DAWN B 1777 SOUTH NOVA ROAD SOUTH DAYTONA, FL 32119	ECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT SELF, TIMOTHY H 1777 SOUTH NOVA RD SOUTH DAYTONA, FL 32119	7 <b>7</b> .		05/0	 00000348420 2/05-60026-002 150.00
NAME STREET ADDRESS CITY-ST-ZIP		·			T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				···IN THIS	SSPACE
TITLE NAME STREET ADDRESS CITY-SJ-ZIP					; · · .
PITLE NAME STREET ADDRESS CITY-ST-ZIP			<u>*************************************</u>		
12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(f). Floridal 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 of the receiver or trustee empowered to execute this report as required by Chapter 607 Floridal Statutes; and that my name appears in Block 10 or Block 11 if					