2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 06, 2005 8:00 am Secretary of State **DOCUMENT # P00000041863** 05-06-2005 90083 033 ***150.00 CHRISTINE BUTTIGIEG & ASSOCIATES, INC. Principal Place of Business Mailing Address 1320 NE 42ND STREET 1320 NE 42ND STREET 40000erv FORT LAUDERDALE, FL 33334 FORT LAUDERDALE, FL 33334 2. Principal Place of Business 3. Mailing Address NE 48 COUNT 1585 1585 Suite, Apt. #, etc. Suite, Apt. #, etc. 05022005 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For ont l 65-1005488 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired SA 3336 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BUTTIGIEG, CHRISTINE** Street Address (P.O. Box Number is Not Acceptable) 1320 NE 42ND STREET FORT LAUDERDALE, FL 33334 City Zip Code 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 rematating) DATE FILE NOWIII FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PSTD ☐ Detete Addition **BUTTIGLEG, CHRISTINE** NAME NAME STREET ADDRESS 1320 NE 42ND STREET STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33334 CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITS F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of execute this report 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 like empowered. SIGNATURE:

FILED

Division of Conporations Attachment 2670 EXECUTIVE Conten Circle 40083218 Suite 100 #P000000 41863 TALLA HASSEE, FL, 32301 CHRISTINE BUTTIGEL 1585 NE 48 COUNT MAY 2 nd 2005 Fort Lavoéndale, FL, 33334 TEL: 954 817 4777 DEAN Sins, I citmiged adress and never realized that I didn't receive my Norice for filing Annual report for the company CHRISTINE BUTTICIET T ASSOCIATES P00000041863. I must apologize for being late.

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Fort Invocadale FL 33334 Please, tell me if there is a form to fill out on a procedure to follow. I am sonry for the delay, but, please accept to void the penalty. \$150. Find enclosed my check of \$150. My Best Regards at full of