

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000052876

FILED  
Apr 02, 2005  
Secretary of State

Entity Name: COME AGAIN, INC.

**Current Principal Place of Business:**

2441 SEVEN SPRINGS BLVD  
NEW PORT RICHEY, FL 34655 US

**New Principal Place of Business:**

**Current Mailing Address:**

2731 QUIET HOLLOW CT  
NEW PORT RICHEY, FL 34655 US

**New Mailing Address:**

5717 WEST SHORE DR  
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3655912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIYAD, INASS  
2731 QUIET HOLLOW CT.  
NEW PORT RICHEY, FL 34655 US

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

RIYAD, INASS  
5717 WEST SHORE DR  
NEW PORT RICHEY, FL 34652 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/02/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: RIYAD, INASS  
Address: 2731 QUIET HOLLOW CT.  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TD ( ) Delete  
Name: RIYAD, ADEL  
Address: 2731 QUIET HOLLOW CT.  
City-St-Zip: NEW PORT RICHEY, FL 34655

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

Title: PSD (X) Change ( ) Addition  
Name: RIYAD, INASS  
Address: 5717 WEST SHORE DR  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD (X) Change ( ) Addition  
Name: RIYAD, ADEL  
Address: 5717 WEST SHORE DR  
City-St-Zip: NEW PORT RICHEY, FL 34652

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: INASS RIYAD

Electronic Signature of Signing Officer or Director

PSD

04/02/2005

Date