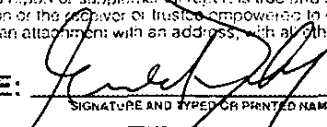


2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

05 JUL 20 PM 2:31

SECRET
TALLAHASSEE

DOCUMENT # P00000074946					
1. Entity Name S.S.C.I. OF FLORIDA, INC.					
Principal Place of Business 180 LYMAN RD STE 100 CASSELBERRY, FL 32707			Mailing Address 180 LYMAN RD STE 100 CASSELBERRY, FL 32707		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	06142005 Chg-P CR2E034 (10/03)	
4. FEI Number 59-3664696				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HOUSE, CURTIS A 180 LYMAN RD STE 100 CASSELBERRY, FL 32707			Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when changing) _____ DATE _____					
Amended AR is \$61.25		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE V	NAME HOUSE, CURTIS A		TITLE V/S	NAME Curtis A. House	
STREET ADDRESS 180 LYMAN RD #100	CITY-STATE-ZIP CASSELBERRY, FL 32707		STREET ADDRESS 180 Lyman Road, #100	CITY-STATE-ZIP Casselberry, FL 32707	
TITLE P	NAME NEWSOME, HARVEY G JR		TITLE T	NAME Harvey G. Newsome Jr.	
STREET ADDRESS 180 LYMAN RD #100	CITY-STATE-ZIP CASSELBERRY, FL 32707		STREET ADDRESS 180 Lyman Road, #100	CITY-STATE-ZIP Casselberry, FL 32707	
TITLE P	NAME Gerald Drosky		TITLE P	NAME Gerald Drosky	
STREET ADDRESS 180 LYMAN RD #100	CITY-STATE-ZIP CASSELBERRY, FL 32707		STREET ADDRESS 180 Lyman Road, #100	CITY-STATE-ZIP Casselberry, FL 32707	
100058044961 07/29/05--01047--021 **\$61.25			100058044961 07/29/05--01047--021 **\$61.25		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 007, 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: 			Gerald Drosky		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 7/18/05		