DV Ruling files

2005 FOR PROFIT CORPORATION ANNUAL REPORT

05-23-2005 90002 039 ***150.00 P00000085301

						100000005501	
1. Entity Nam	MENT # P00000085			FILE DCT -3	ED PM 2: 14		
Principal Plac	e at Business	Mailing Address	T	ALLAHASSEE,			OCT 0 4 38
1031 (VES D 232 MIAMI, FL 3		3298 NW 169 TERR Miami, FL 33056		, and a	.⊣ LUMUA	L' Bopaus	OC1 o
2. Principal P	Place of Business	3. Mailing Address					
\$vite. Apt.		103 TV/5 Sujie, Apr. #, etc. # 832	Saint R	05192005	Chg-P	CR2E034 (10/03)	
City & Stat	e	City & State Higami, F1.		4, FEI Numb 65-103			optied For or Applicable
^{Zip} 3317	Country	Zip 33179	Country U.S.		of Status Desired	\$8.75 Add Fee Require	
	o. Marine and Address of Content	Heffistered Affects	Name	·		registered Agent	
WILLIAMS, ANARITA 1031 IVES DAIRY ROAD 232 MIAMI. FL 33179				Street Address IPO. Box Number is Not Acceptable #332			
THOUSE, I'M CONTROLLED TO THE CONTROL THE CONTROL TO THE CONTRO				CityMiami			เำจ
	e named entity symbol (a) mont for tions of registerate	the purpose changing its	registered office or	registered agent, or bo	oth, in the State of F	lorida. 1 am familiar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable (NOTE	E Registered Agent signat	Use required when renstating)		518/05	
	LE NOWIII FEE IS \$150.00 ue by September 7, 2005	9. Election Campai Trust Fund Cont		\$5.00 May Be Added to Fees	In accordance corporation did	with s. 607.193(2)(b), I not receive the prior	F.S., the notice.
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS	CHANGES TO OF	FICERS AND DIRECTOR	S IN 11
TIFLE	P	☐ Delete	TRILE	williams,	Avarita	Change:	Addition
NAME STREET ADDRESS CITY-ST-ZIP	WILLIAMS, ANARITA 1032 IVES DAIRY ROAD, SUITE MIAMI, FL 33179	232	NAME STREET ADDRESS CITY-ST-ZIP	1031 Iurs B Miami, Fl.	tial, Sixit	c 932	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE HAME STREET ADDRESS			☐ Change	Addition
CITY-SI-ZIP		☐ Delete	CITY-SI-ZIP			☐ Change	Addition
NAME STREET ADDRESS CITY-S1-ZIP			NAME STREET ADORESS CITY-51-ZIP				
TITLE		C) Delete	1ITLE NAME		··. ···· · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZUP				
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CITY-SI-ZIP		skin tilia alaa	CITY-ST-ZIP	ted in Continues and count	OS Claside Cost	I forether more for the same of	
indicated of the co changed	certify that the information supplied with d on this report or supplemental report provation or the receiver or trusted on the distribution of the receiver or trusted on the distribution of the receiver of the receiver distribution of the receiver of the receiver of the receiver of the distribution of the receiver of	s true and accurate and that r	ny signature shali i	nave the same legal effe	ict as if made under les; and that my nar	roath; that I am an office ne appears in Block 10 c	r or director ir Block 11 if
SIGNAT	TURE:	MENTED NAME OF BIONING OFFICER	On materion		<u> </u>	(305)414-	3769