## **2005 FOR PROFIT CORPORATION** ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

## Aug 31, 2005 8:00 am Secretary of State **DOCUMENT # P00000090798** 08-31-2005 90014 012 \*\*\*150.00 1. Entity Name FLORIDA MINI STOCK CHALLENGE, INC. Principal Place of Business Mailing Address 50064289 201 ESSARY STREET NORTH 201 ESSARY STREET NORTH AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 2. Principal Place of Business 3. Mailing Address 10015 Prevatt Street Prevatt Suite, Apt. #, etc. Suite, Apt. #, etc. 05032005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For bibsonton 58-2583110 Not Applicable Country U.S.A Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HUTTO, TODD Street Address (P.O. Bbx Number is Not Acceptable) 201 ESSARY STREET NORTH AUBURNDALE, FL 33823 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 reinstating) FILE NOW!!! 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. corporation did not receive the prior notice. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE □ Delete TITLE ጋ Change . ☐ Addition Hutto Todd 10015' Prevott Street HUTTO, TODD NAME NAME 201 ESSARY STREET NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AUBURNDALE, FL 33823 CITY-ST-ZIP <u>Gibsonton FL 33534</u> ☐ Delete Change TITLE TITLE ☐ Addition Hutto Debbie 10015 Prevatt Street HUTTO, DEBBIE NAME MAME 201 ESSARY STREET NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AUBURNDALE, FL 33823 CITY-ST-ZIP boonton FL 33534 ☐ Delete TITLE ☐ Change ☐ Addition TITLE 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 Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 to 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 Jike empowered.

**FILED**