## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 27, 2005 08:00 AM Secretary of State

1. Entity Nar	MENT # P00000107				·	
•	ce of Business MEADOW DR. 33615	Mailing Address 9731 LONG MEADOW DR. TAMPA, FL 33615		T (MONDOC FOR S	FALIF ANJIN MUSIK MUFIK MUFIK INGIK M	
E	OO NOT WRITE	CE	04222005 4. FEI Number 59-3687	<del></del>	2E034 (10/03)  Applied For Not Applicable \$8.75 Additional Fee Required	
	, ZACHARY G MEADOW DR.	DO NOT WRITE IN THIS SPACE				
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)  DATE						
FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			ncing \$5.	00 May Be ed to Fees		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUNKLEY, ZACHARY 9731 LONG MEADOW DR. TAMPA, FL 33615	DIRECTORS			U00000335 04/27/05-801	955 03-022 150.00
NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRIT	j
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN I	HIS SPAC	; <b>E</b>
NAME STREET ADDRESS CITY - ST - ZIP		· · <del>· · ·</del> · · · · · · · · · · · · · ·				
TITLE NAME STREET ADORESS CITY+ST+ZIP		A Company of the Comp	_	- ·	January and the season of	
12. I hereby of indicated of the corchanged.	perify that the information supplied with on this report or supplemental report is poration or the receiver or trustee ampo- or on an attachment with appaddingss, v	this filling does not qualify for the exe true and accurate and that my signal wered to execute this report as requi- vith all other like empowered.	mption stated in Sec ture shall have the s red by Chapter 607.	ction 119.07(3)(i), same legal effect a , Florida Statutes;	Florida Statutes, I further as if made under oath; that and that my name appea	certify that the information t I am an officer or director rs in Block 10 or Block 11 if

Butle Zachrny Bunkley 4/25/05
THE ON PRINTED AND SEGMENT OFFICER OR DIRECTOR