

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107891

FILED  
Apr 21, 2005  
Secretary of State

Entity Name: RALPH & CASSANDRA CORP.

## Current Principal Place of Business:

1487 N.W. 54TH STREET  
SHOP  
MIAMI, FL 33142

## New Principal Place of Business:

7185 N AUGUSTA DRIVE  
MIAMI, FL 33015

## Current Mailing Address:

1487 N.W. 54TH STREET  
SHOP  
MIAMI, FL 33142

## New Mailing Address:

7185 N AUGUSTA DRIVE  
MIAMI, FL 33015

FEI Number: 65-1057740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PRESSLEY, RALPH A  
1487 N.W. 54TH STREET  
BUILDING  
MIAMI, FL 33142 US

## Name and Address of New Registered Agent:

PRESSLEY, RALPH A  
7185 N AGUSTA DRIVE  
MIAMI, FL 33015 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:

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PRESSLEY, RALPH  
Address: 1487 N.W. 54TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PRESSLEY, RALPH  
Address: 7185 N AUGUSTA DRIVE  
City-St-Zip: MIAMI, FL 33015

Title: VP ( ) Change (X) Addition  
Name: PRESSLEY, CASSANDRA Y  
Address: 7185 N AUGUSTA DRIVE  
City-St-Zip: MIAMI, FL 33015

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: CASSANDRA PRESSLEY

VP

04/21/2005

Electronic Signature of Signing Officer or Director

Date