2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Alberto A. Sowers - Vice-President signature and Types of Printed Name of Signature and Types of Printed Name of Signature of Printed Name of Pr

SIGNATURE:

DOCUMENT # P00000112327 1. Entity Name GREAT WOOD, INC.					Feb 07, 2005 08:00 AN Secretary of State	
UNEAT V	NOOD, INC.					
Principal Plac	ce of Business	Mailing Address	= -			
C/O ALBERTO SOWERS 9240 SUNSET DRIVE, SUITE 204 MIAMI FL 33173 C/O ALBERTO SOWERS 9240 SUNSET DRIVE, SUITE MIAMI FL 33173				204		
2 Principal	Place of Business	3. Mailing Address				H
Z. (Illioipei)		D. Maining Floor			I LEAGNEN NY BERN BERN BERN BERN ABERN NOON THOIR WARR SWIE NAME HEADTH I'N I	
Suite, Apt	#, etc	Suite, Apt #, etc.			1st MOORE CR2E034 (10/04)	
City & Sta	te	City & State			4. FEI Number 65-1157021 Applied Not App	
Zip Country		Zip Count		itry	5. Certificate of Status Desired	J
	6. Name and Address of Current	Registered Agent	_		7. Name and Address of New Registered Agent	. 44
				Name		
SOWERS, ALBERTO A 9240 SUNSET DRIVE, SUITE 204 MIAMI FL 33173			Street Address (P.O. Box Number is Not Acceptable)			
IVII	(MIT E 33173					
				City	FL Zip Code	
	e named entity submits this statement for tions of registered agent.	r the purpose of changing	its register	ed office or registe	ered agent, or both, in the State of Florida. I am familiar with, and a	ccept
tile ownge.						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (Ni	OTE. Registere	d Agent signature require	ed when reinstating) DATE	
F	FILE NOW!!! FEE IS \$150.00				65.00	
	May 1, 2005 Fee Will Be \$550.00 k Payable to Florida Department of				9. Election Campaign Financing \$5.00 M Trust Fund Contribution. Added to F	
10,	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
NAME	P OTTATI, DOMINGO	☐ Delete	THU NACE	ı	☐ Change ☐ /	Addition
STREET ADDRESS	9240 SUNSET DR STE 104	-		FIADDRESS		
CHY-ST-ZIP	MIAMI FL 33173		LIY	SI ZIP		
THE	VP	☐ Delete	ittu	· •	☐ Change ☐ A	Addition
NAME CLOCKT LINDRESS	OTTATI, BRIGITTE 9240 SUNSET DR STE 204		NAM - 100	EL AODRESS		
CITY-ST-ZIP	MIAMI FL 33173			-\$I-ZIP		
MILE	VP	☐ Defete	jute		☐ Change ☐ /	Addition
NAME	SOWERS, ALBERTO A		NAM	1		
STREET ADDRESS GITY-ST-ZIP	9240 SUNSET DR STE 204 MIAMI FL 33173			FI ADDRESS -S1-ZIP		
TITLE	S	☐ Delete	itili Tili		HOODOO T ZZO □ Change □ /	Addition
NAME	BENNACHIO, MAYRA		, NAM	:	الاستان 85/07/05 02/07/05 02/07/05 02/07/05 02/07/05	
STREET ADDRESS	9240 SUNSET DR STE 204			ET ADDRESS	ors 0 15 00 00000 030 100 00	
CITY-ST-ZIP	MIAMI FL 33173		CHY	·S1 · ZIP		
TITLE	AS . OTTATI-GAMS, MONICA I	☐ Delete	ture		Change D	Addition
NAME STREET ADDRESS	9240 SUNSET DR STE 204		NAMI	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33173			SI-ADURESS		
MILE	T	Delete	- UILL		☐ Change ☐ A	Addition
NAME	OTTATI-GAMS, DOMINGO L	Li Delete	NAME		country	
STREET ADDRESS	9240 SUNSET DR STE 204	29	· I STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33173	<u> </u>		ST-ZIP		
12. I hereby of indicated of the cor changed.	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee impo or on an attachment with an addless	this filing does not qualify it true and accurate and that wered to execute this repart with all other like empowers	for the exer t my signat nt as requir d.	mption stated in Seure shall have the ed by Chapter 60	ection 1 19.07(3)(i), Florida Statutes. I further certify that the informa same legal effect as if made under oath, that I am an officer or dire 17. Florida Statutes, and that my name appears in Block 10 or Block	tion ector (11 if

February 3,2005

305-279-0970 Daytime Phone #

FILED