2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Apr 09, 2005 08:00 AM DOCUMENT # P00000113905 **Secretary of State** JERRY B. PROCTOR, P.A. Principal Place of Business Mailing Address 200 S. BISCAYNE BLVD. 200 S. BISCAYNE BLVD. **SUITE 2500 SUITE 2500** MIAMI, FL 33131-2336 MIAMI, FL 33131-2336 03082005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1061443 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PROCTOR, JERRY B DO NOT WRITE 200 SOUTH BISCAYNE BLVD., SUITE 2500 IN THIS SPACE MIAMI, FL 33131-2336 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) U000000296055 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees 04/09/05-80053-010 150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE DPST NAME PROCTOR, JERRY B 200 S. BISCAYNE BLVD. SUITE 2500 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 331312336 TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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

FILED