

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002934

Entity Name: METAMORPHECISE, INC.

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

1500 NW 113 WAY
PEMBROKE PINES, FL 33026

New Principal Place of Business:

111 GRAND PALMS DRIVE
PEMBROKE PINES, FL 33027

Current Mailing Address:

1500 NW 113 WAY
PEMBROKE PINES, FL 33026

New Mailing Address:

111 GRAND PALMS DRIVE
PEMBROKE PINES, FL 33027

FEI Number: 65-1069064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, MARK H ESQ
7771 W OAKLAND PARK BLVD
#122
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DWOSKIN, LISA
Address: 1500 NW 113 WAY
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DWOSKIN, LISA
Address: 13806 SW 52 COURT
City-St-Zip: MIRAMAR, FL 33025

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: LISA DWOSKIN-WOITYRA

PRES

01/10/2005

Electronic Signature of Signing Officer or Director

Date