2005 FOR PROFIT CORPORATION ANNUAL REPORT					FILED May 04, 2005 08:00 AN Secretary of State		
	MENT # P01000091	and the second sec			Seci	retary of State	
Principal Piace 165 TREASU #102 MERRITT ISL		Mailing Address 165 TREASURE ST. #102 MERRITT ISLAND, FL 32952	-	- ··		19 20122 JULIE 2003 BULIE (1801 / 1803	
	O NOT WRITE	N THIS SPA		04292005	No Chg-P	CR2E034 (10/03)	
uran e ser	6. Name and Address of Current Rec			 FEI Number 59-36990 Certificate of 		Applied For Not Applicable \$8.75 Additional Fee Required	
JARVIS, F 165 TREA: #102	RANKW				IOT WR HIS SPA		
8. The above	named entity submits this statement for th	e purpose of changing its register	ed office or register	ed agent, or both,	n the State of FlorIda	a. Fam familiar with, and accept	
SIGNATURE. FIL	Sonauxe, yoed or printed name of registered agent and the NOW!!! FEE 13 \$150.00 my 1, 2005 Fee will be \$550.00	(NOTC: Registere (NOTC: Registere S. Election Campaign Final Trust Fund Contribution.		when reinstating) 00 May Be ed to Fees	· · · · · · · · · · · · · · · · · · ·	DATE	
19.	OFFICERS AND DIF	ECTORS		n de la companya de La companya de la comp	an a sign a shekara A shekara A date taga a shekara	a na ang mga na ang mga na ga na Na na ga na g	
TITLE NAME STREET ADDRESS GITY - ST - ZIP	D JARVIS, FRANK W 165 TREASURE ST. #102 MERRITT ISLAND, FL 32952		A state of the state of		U00000 05/05/05-1	363364 80159-002 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		entere (marca e - 1 v a danie v sour - antagana		۲. «. أ. جه . ه تم ياغة التربي 			
NAME STREET ADDRESS CITY - ST - ZIP			Litaler tentettet let	i do I		ITE	
title Name Street Address Gity - St-Zip					HIS SPA	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
title Name Street address City - St - Zip				· · · · · · · · · · · · · · · · · · ·			
title Name Street Adoress City-st-zip							
12. Thereby of indicated of the cor changed, SIGNAT	Certify that the information supplied with this on this report or supplemental report is tru- poration or the receiver of trustee empower or on an attachment with an address, with OURE:	a filling does not qualify for the exe e and accurate and that my signa red to execute this report as requ all other like empowered.	ANK JY		Florida Statules. I fur s if made under oath and that my name ap	ther certify that the information ; that I am an officer or director popears in Block 10 or Block 11 if 321 459-280 Daytme Phone #	