2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 08:00 AM
Secretary of State

1. Entity Nam	MENT # P01000089999			··· Sec	retary o	i State	
Principal Plac 1766 7TH A' VERO BEACH	VE SW	Mailing Address 1766 7TH AVE SW VERO BEACH, FL 32962		1 1880 1880 1 11		NINE INIINE INIINE ENIINE ENIINE	limiwhe si swat
DO NOT WRITE IN THIS SPACE 5. Name and Address of Current Registered Agent				01042005 No Chg-P CR2E034 (10/03) 4. FEI Number			
JULIAN, ROBERT 1766 7TH AVE SW VERO BEACH, FL 32962 DO NOT WRITE IN THIS SPACE							
8. The above named entity <u>Submits</u> 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 Signalure types or printed name bit registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating). DATE							
After M:	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.			0000003 04/26/05-8	32181 0047-024 1	50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PVD JULIAN, ROBERT 1766 7TH AVE SW VERO BEACH, FL 32962						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- 37 /			•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WE	RITE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		IN 7	THIS SPA	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		a # .	-	·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Av I		· · · · · · · · · · · · · · · · · · ·		
12. I hereby of indicated of the cor changed,	pertify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowers, or on an attachment with an articless, with a	filing does not qualify for the exe and accurate and that my signal ed to execute this report as requi all other like empowered.	mption stated in Se ture shall have the t red by Chapter 607	ction 119.07(3)(same legal effec , Florida Statute), Florida Statutes. I fu I as if made under oati s, and that my name a	rther certify that the n; that I am an office ppears in Block 10	Information er or director or Block 11 if