## **≈** €2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Jan 14, 2005 08:00 AM Secretary of State **DOCUMENT # P01000106218** DAPSER & ASSOCIATES, P.A. Principal Place of Business\_\_\_ Mailing Address 302 SOUTHARD ST., STE 204 302 SOUTHARD ST., STE 204 KEY WEST, FL 33040 KEY WEST, FL 33040 No Chg-P CR2E034 (10/03) 01072005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1149712 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CORPORATE CREATIONS NETWORK INC. . . 941 FOURTH STREET #200 MIAMI BEACH, FL 33139 IN THIS SPACE 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. 1 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE DAPSER, WAYNE R NAME 302 SOUTHARD ST., STE 204 STREET ADDRESS CITY-ST-ZIP KEY WEST, FL 33040 U00000181278 TITLE 01/14/05-80041-020 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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**