. 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P01000115440

FILED May 03, 2005 8:00 am Secretary of State 05-03-2005 90081 013 ***158.75

1. Entity Name PRIDENT INC.							_					
Principal Place of Business 23314 LIBERTY BELL TERR BOCA RATON, FL 33433-7609			Mailing Address 23314 LIBERTY BELL TERR BOCA RATON, FL 33433-7609				_	yvv		1211 1821 1111 184111 1841	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2. Principal P	lailing Address	g Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04222005	Chg-P	CR2E0	34 (10/03)		
City & State			City & State				4. FEI Numb 75-304			<u> </u>	pplied For ot Applicable	
Zip	Country	qi	Country				of Status Desired		\$8.75 Add Fee Require			
SANCHEZ, JULIO R 8205 NW 75 AVE FT LAUDERDALE, FL 33321						Name SANCHEZ JAIRO Street Address (P.O. Box Number is Not Acceptable) 23314 LIBERTY BELL						
y 2					City		RATON	DENT	FL	Zip Cod	 a २ २	
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 The Save Heat (NOTE Registered Agent signature required when reinstating) DATE												
After Ma	E NOW!!! FEE IS \$150.0 ay 1, 2005 Fee will be \$	550.00	Trust Fund Contr				00 May Be ed to Fees					
TO. TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICER D SANCHEZ, JULIO R 8205 NW 75 AVE FT LAUDERDALE, FL 333	IS AND DIRECT	TORS Delete		1		ADDITIONS	/CHANGES TO C	PFFICERS AND	DIRECTOR Change	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	SANCHEZ, JAIRO A MAI 23314 LIBERTY BELL TERR STE			I	233	CHEZ J 14 LIB A RATO	AIRO ERTY BE N, FL 3	LL TER 3433-7	XXChange RR 609	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		I	S ORD 233	ONEZ V	ICTORIA ERTY BE N, FL 3	LL TER	Change	XX Addition	
TITLE HAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		I			•		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1					☐ Change	☐ Addilion	
TITLE HAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		I					☐ Change	Addilsen	
12. I hereby o	certify that the information suppli	ed with this filin	ng does not qualify for	the exen	nption state	ed in Sec	otion 119.07(3)	(i), Florida Statute	s. I further cer	tily that the i	information	

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 control of indicated on this report or supplies of the corporation of the receiver or located emperical and the corporation of the receiver or located emperical and the corporation of the corpora

JAIRO SAUCHEZ

(561)482-1077