2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Jan 14, 2005 08:00 AM Secretary of State

ANNUAL REPORT					Jan 14, 2005 08:00 A			
1. Entity Nam	MENT # P020000084	43			Se	cretary (of State	
,	e of Business	Mailing Address						
1903 ORO C CLEARWATER		1903 ORO COURT CLEARWATER, FL 33764						
DO NOT WRITE IN THIS SPACE			CE					
				01112005	No Chg-P	CR2E034 (10/0		
				4. FEI Numb 80-002			Applied For Not Applicable	
					of Status Desired		Additional	
	6. Name and Address of Current Re	istered Agent		l		Fee Req	niced	
PATEL, MI	INA		DO	NOT W	/ I> 1 -T I	i		
1903 ORO COURT			DO NOT WRITE					
CLEARWATER, FL 33764				IN .	THIS SF	PACE	·	
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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, typed or printed name of registered agent and tide if applicable. (NOTE, Registered Agent signature require)						DATE		
FILE NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be ed to Fees				
10.	OFFICERS AND DIF	ECTORS				**************************************		
TITLE NAME	PATEL, MINA				Litheratura	เรียบริษาวิวัลก		
STREET ADDRESS CITY-ST-ZIP	1903 ORO COURT CLEARWATER, FL 33764					ñ181270 -80040- -02 2	150.00	
TITLE	OLEARWATER, I'E 33704		•					
NAME STREET LODGESS								
STREET ADDRESS CITY-ST-ZIP								
TITLE								
NAME STREET ADDRESS				no	ALCOTT MA	mare e		
CITY-ST-ZIP					NOT W			
TITLE Name				IN .	THIS SF	PACE	}	
STREET ADDRESS								
CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·					:	
NAME								
STREET ADDRESS CITY-ST-ZIP								
TITLE			1					
NAME								
STREET ADDRESS CITY-ST-ZIP								
12. I hereby of indicated of the corphanged,	pertify that the information supplied with this on this report or supplemental report is truporation or the receiver or trustee empower or on an attachment with an address, with	filing does not qualify for the exe e and accurate and that my signal red to execute this report as requi- all other like empowered.	mption stated In Se ure shall have the s red by Chapter 607	ction 119.07(3) same legal effec , Florida Statute	es; and that my name	e appears in Block 16	0 or Block 11 if	
	V S.D !^/	· //		V 1 10	7 - AA	V 7 27 - 6	20 - 40 mg	