## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 24, 2005 08:00 AM

DOCUMENT # P02000014214  1. Entity Name PENNSYLVANIA FRESH MUSHROOM, INC.				Secretary of State
Principal Place PO BOX 310 TAMPA, FL		Mailing Address PO BOX 310227 TAMPA, FL 33680		
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent			CE	01122005 No Chg-P CR2E034 (10/03)  4. FEI Number
ROZA, STEPHEN 1220 WISPER RUN CT LUTZ, FL 33558				DO NOT WRITE 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and tills if applicable [NOTE Registered Agent signature required when reinstating) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees				
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DI PD ROZA, STEPHEN 1220 WISPER RUN CT LUTZ, FL 33558	RECTORS		U00000190145 01/24/05-80120-005 150.00
NAME STREET ADDRESS CITY-51-ZIP TITLE NAME STREET ADDRESS CITY-51-ZIP			<u></u>	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	_			
12. I hereby of indicated of the correctanged,	URE:	s filling does not qualify for the exer e and accurate and that my signatured to eyerdite this report as requir all other like empowered.	•	ction 119.07(3)(1), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director , Florida Statutes; and that my name appears in Block 10 or Block 11 if