

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016484

FILED
Apr 14, 2005
Secretary of State

Entity Name: CODE ADMINISTRATION, PLAN REVIEW & INSPECTION SERVICES, INC.

Current Principal Place of Business:

1079 SHOTGUN RD.
SUNRISE, FL 33326

New Principal Place of Business:

1011 SHOTGUN RD.
SUNRISE, FL 33326

Current Mailing Address:

1079 SHOTGUN RD.
SUNRISE, FL 33326

New Mailing Address:

1011 SHOTGUN RD.
SUNRISE, FL 33326

FEI Number: 03-0390316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ELZWEIG, GARY H
1079 SHOTGUN RD.
SUNRISE, FL 33326 US

Name and Address of New Registered Agent:

ELZWEIG, GARY H
1011 SHOTGUN RD.
SUNRISE, FL 33326 US

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.

SIGNATURE:

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: ELZWEIG, GARY H PE
Address: 3717 PINE LAKES DRIVE
City-St-Zip: WESTON, FL 33332

Title: EVP () Delete
Name: MOLINELLI, MARK R
Address: 12150 CLOVER DRIVE
City-St-Zip: FORT MYERS, FL 33905

Title: VP () Delete
Name: PASSANTE, MELISSA
Address: 15241 SW 49TH STREET
City-St-Zip: DAVIE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PASSANTE, MELISSA
Address: 18858 NORTH DALE MABRY
City-St-Zip: LUTZ, FL 33548

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY H. ELZWEIG

MR.

04/14/2005

Electronic Signature of Signing Officer or Director

Date