2005 FOR PROFIT CORPORATION

FILED Feb 09. 2005 08:00 AM te

ANNUAL REPORT			Secretary of Sta
DOCUMENT # P02000019903			Secretary of Sta
1. Entity Name — COMPORATED	-		
Principal Place of Business	Mailing Address	 	1
4021 GULF SHORE BLVD N VILLA 19 NAPLES, FL 34103	4021 GULF SHORE BLVD N VI NAPLES, FL 34103	LLA 19	
			01242005 No Chg-P CR2E034 (10/03)
DO NOT WRITE IN THIS SPA		CE	4. FE! Number Applied For
			04-3630212 Not Applicable
		<u> </u>	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current	Registered Agent .	- · ·	
FRANJAC, DANIEL R 4021 GULF SHORE BLVD.			DO NOT WRITE
N-VILLA 19			IN THIS SPACE
NAPLES, FL 34103			
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 offiled name of registered agent and title if applicable. (NOTE Registered Agent agreature required when remistating) DATE			
FILE NOW! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.0	وريت أسيسي ا		ed to Fees
10. OFFICERS AND	DIRECTORS	1	
TIFLE PST NAME FRANJAC, DANIEL R	•	1	
STREET ADDRESS 4021 GULFSHORE BLVD N., VIL	LA 19	1	Unnnnn221 98 5
TITLE		_	U00000221985 02/09/05-80 0 55-010 15 0. 00
NAME STREET ADDRESS			
CITY-ST-ZIP	<u>. +</u>	<u> </u>	
TITLE NAME			
STREET ADDRESS			DO NOT WRITE
CITY-ST-ZIP	<u> </u>	1	IN THIS SPACE
NAME		1	IN THIS SPACE
STREET ADDRESS CITY- ST- ZIP	• . •	<u> </u>	
TITLE]	
NAME STREET ADDRESS		1	
CITY-ST-ZIP	<u> </u>	-1	
ITILE NAME		1	
STREET ADDRESS CITY- ST- ZIP		1	
	this filing does not qualify for the exe	emption stated in Se	ction 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 it made under oath; that I am an officer or director of the corporation of the reserver 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 changed, or on an attachment with an address, with all other like empowered.

GNATURE:

239-434-05

CONSTRUCT

CONST

SIGNATURE: _