## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

7/7/2005-90002-015-\$158.75-\$158.75 FILED

Procipil Place of Business \$317 W. 15 COURT HALEAH, FL 33012  E. Principil Place of Business  Sues, Apil. 9, RC.  Sues, Apil.	DOCUMENT # P02000025192  1. Entity Name FARAM INVESTMENT CORP.						05 SEP 18 AH 8: 49					
Sal 7 M. 15 COURT MALEAH, FL. 33012  I. Principal Place of Business  Suite, Apr. 4, etc.  Sui		VVCO INCIVI OOM .					1716 1711		SIAI			
HALEAH, FL 33012  HALEAH, FL 33012  Principal Place of Business  Suite, Apt #, etc.  Obstitution of The State of Chyp. Creations of Status Desired Dr. Applied For To-Suite To-Suite Desired Dr. Status Desired Dr. St. To-Accidence of Status Dr. St. To-Accidence Dr. St.	•						, ,	-111/100 i. i., [	LUGGA			
Suite, Apt. 8, etc.    Suite, Apt. 8, etc.    Suite, Apt. 8, etc.    OSSI2005   Chg.P   CR25004 (10/03)   Chy & State   Chy & State   A. FEI Number   Applied For   Not Applie												
City & State  A. FEI Number  T. So 3036822  Zip  Country  Zip  Zip  Country  FEL  Zip  Country  FEL  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	Principal Place of Business     3. Mailing Address											
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E. Neane and Address of Current Registered Agent  FAJIN, RAMON A  STEW Address (P.O. Box harber is Night Address of New Registered Agent)  Stew Address (P.O. Box harber is Night Address of New Registered Agent)  FAJIN, RAMON A  STEW Address (P.O. Box harber is Night Address of New Registered Agent)  FAJIN, RAMON A  STEW Address (P.O. Box harber is Night Address of New Registered Agent)  FILE (P.O. AMADE)  Crip  FILE NOWILL File 13 - \$150.00  Due by September 7, 2005  SIGNATURE  FILE NOWILL File 13 - \$150.00  Due by September 7, 2005  Due by September 7, 2005  Trust Fund Contribution.  POTE Registered York Special States of Portice.  POTE Registered York Special Stat	City & State City & State					Ì		-			<del></del>	
FALIN, RAMON A 5317 W. 15 COURT HIALEAH, FL 33012  B. The above named entity subget this determent for the purpose of changing its registered office or registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the obligations of registered agent, or both, in the State of Forlida. Lem familiar with, and accept the state of Forlida. Lem familiar with, and accept the state of Forlida and accept the state of F	Zip Country		Zip Countr		lry				\$8.75 Additional			
STORM TURE    Column		6. Name and Address of Current F	legistered Agent		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7. Name and	Address of New	Registered A	gent		
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