

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045977

Entity Name: CFL VENTURES, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

7409 HERRICKS LOOP
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

7409 HERRICKS LOOP
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 01-0679971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBAZA, ALRICK R
7409 HERRICKS LOOP
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

BARBAZA, ALRICK R
7409 HERRICKS LOOP
ORLANDO, FL 32835 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: ALRICK R BARBAZA

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARBAZA, ALRICK R
Address: 7409 HERRICKS LOOP
City-St-Zip: ORLANDO, FL 32835 US

Title: VP () Delete
Name: MARKEL, RAYLENE B
Address: 7409 HERRICKS LOOP
City-St-Zip: ORLANDO, FL 32835 US

Title: N/A (X) Delete
Name: NOT, APPLICABLE
Address: 7409 HERRICKS LOOP
City-St-Zip: ORLANDO, FL 32835 US

Title: N/A (X) Delete
Name: NOT, APPLICABLE
Address: 7409 HERRICKS LOOP
City-St-Zip: ORLANDO, FL 32835 US

Title: N/A (X) Delete
Name: NOT, APPLICABLE
Address: 7409 HERRICKS LOOP
City-St-Zip: ORLANDO, FL 32835 US

Title: N/A (X) Delete
Name: NOT, APPLICABLE
Address: 7409 HERRICKS LOOP
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: ALRICK BARBAZA

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date