## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 29, 2005 08:00 AM Secretary of State

1. Entity Narr	ne –	P02000047			, 3	,	,	
5281 THROU	e of Business UGHBRED LANE S, FL 33330 _	~	Mailing Address 5281 THROUGHBRED LANE SW RANCHES, FL 33330			<del></del>		
D		WRITE	CE	04232005 4. FEI Numb 01-069		CR2E034 (1		
		ANE		_	NOT W THIS SF			
The above the obligation     SIGNATURE	ions of registered a	nits this statement for agent.	the purpose of changing its register dilite if applicable (NOTE Register)	ed office or registers  d Agent agreemen equired		th, in the State of Fl	orida. 1 am familia	ar with, and accept
After Ma	E NOW!!! FEE ay 1, 2005 Fe	e will be \$550.0	ncing \$5.	00 May Be ed to Fees				
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	D ALI, SYED FAI 5281 THROUG SW RANCHES	HBRED LANE	TRECTORS			1/00000 04/29/05-	344002 30116-018	150.00
NAME STREET ADDRESS CITY-ST-ZIP		- <del></del>	·					-
NAME STREET ADDRESS CITY-ST-ZIP				-  -	DO	NOT W	RITE	
NAME STREET ADDRESS CITY-ST-ZIP				·	IN T	THIS SF	PACE	}
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
NAME STREET ADDRESS CITY-ST-ZIP								
<ol> <li>I hereby c indicated of the corp changed,</li> </ol>	ertify that the infon on this report or su poration or the rect or on an attachme	nation supplied with the polemental report is to be a contracted empower trustee empowers with an address, with an address, with an address, with an address.	his filing does not qualify for the exerue and accurate and that my signal wered to execute this report as requisit all other like ampowered.	mption stated in Sec ture shall have the s red by Chapter 607,		,		at the information officer or director k 10 or Block 11 if
SIGNATURE: 4/25/85' SIGNATURE AND TYPER OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Cale Dayling Proce #								