

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061683

Entity Name: SEED OF LIFE, INC.

FILED  
Mar 23, 2005  
Secretary of State

## Current Principal Place of Business:

5100 WASHINGTON ST.  
SUITE 512  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

341 LAKE VIEW DRV  
SUITE 201  
WESTON, FL 33326

## Current Mailing Address:

5100 WASHINGTON ST.  
SUITE 512  
HOLLYWOOD, FL 33021

## New Mailing Address:

341 LAKE VIEW DRIVE  
SUITE 201  
WESTON, FL 33326

FEI Number: 75-3067008

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOAIZA, YAMILETH  
5100 WASHINGTON ST.  
SUITE 512  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

LOAIZA, YAMILETH  
341 LAKE VIEW DRIVE  
SUITE 201  
WESTON, 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: YAMILETH LOAIZA

03/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LOAIZA, YAMILETH  
Address: 5100 WASHINGTON ST., SUITE 512  
City-St-Zip: HOLLYWOOD, FL 33021

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LOAIZA, YAMILETH  
Address: 341 LAKE VIEW DRIVE SUITE 201  
City-St-Zip: WESTON, FL 33326

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: YAMILETH LOAIZA

PD

03/23/2005

Electronic Signature of Signing Officer or Director

Date