2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 12, 2005 08:00 AM Secretary of State DOCUMENT # P02000068534 GBG LEGAL SERVICES, P.A. Principal Place of Business ___ Mailing Address 2700 W. ATLANTIC BLVD. 2700 W. ATLANTIC BLVD. 200-32 200-32 POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 04052005 No Chg-F CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3687845 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GILLETT, GEORGIA B ESQ. DO NOT WRITE 2700 W. ATLANTIC BLVD. SUITE 200-32 IN THIS SPACE POMPANO BEACH, FL 33069 3. 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 printed name of registered agent and title If applicable (NOTE Registered Agent signature required when reinstating) DATE FiLE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GILLETT, GEORGIA B ESQ. STREET ADDRESS 2700 W. ATLANTIC BLVD., SUITE 200-32 UCC0000300522 CITY-ST-ZIF POMPANO BEACH, FL 33069 04/12/05-80025-001 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

-97P-9220

Dovtime Phone #