## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 30, 2005 08:00 AM Secretary of State DOCUMENT # P02000077445 1. Entity Name RICHARD BASSETT, INC. Principal Place of Business Mailing Address 2291 N.E. 44TH STREET 2291 N.E. 44TH STREET LIGHTHOUSE POINT, FL 33064 LIGHTHOUSE POINT, FL 33064 The second secon CR2E034 (10/03) 01102005 No Chg-P DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 52-2384721 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Becuired 6. Name and Address of Current Registered Agent LOUIS J. DEREUIL DO NOT WRITE 2600 NE 14TH ST. POMPANO BEACH, FL 33062 IN THIS SPACE 8. 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) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS PSTD TITLE BASSETT, RICHARD R NAME STREET ADDRESS 2291 NE 44TH STREET 1100000345484 CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064 04/30/05-80038-013 150.00 TITLE NAME STREET ADDRESS CITY-ST-7P 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 STREET ADDRESS CITY-ST-7IP

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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or true e 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 will any address, with all other like empowered.

TH PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

**FILED**