

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079014

Entity Name: ILM CORP.

FILED  
Apr 18, 2005  
Secretary of State

## Current Principal Place of Business:

5710 LENOX AV  
624  
JACKSONVILLE, FL 32205

## Current Mailing Address:

5710 LENOX AV  
624  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

5800 BEACH BLVD  
SUITE 203-401  
JACKSONVILLE, FL 32207

## New Mailing Address:

5800 BEACH BLVD  
SUITE 203-401  
JACKSONVILLE, FL 32207

FEI Number: 56-2308625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BASILIO, JOSE D  
250 NW 107 AVENUE  
108  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEAL, WILLIAM O  
Address: 5710 LENOX AV NO. 624  
City-St-Zip: JACKSONVILLE, FL 32205

Title: V ( ) Delete  
Name: PRADA, ROSANNA M  
Address: 5710 LENOX AV NO. 624  
City-St-Zip: JACKSONVILLE, FL 32207

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEAL, WILLIAM O  
Address: 5800 BEACH BLVD, SUITE 203-401  
City-St-Zip: JACKSONVILLE, FL 32207

Title: V (X) Change ( ) Addition  
Name: PRADA, ROSANNA M  
Address: 5800 BEACH BLVD, SUITE 203-401  
City-St-Zip: JACKSONVILLE, FL 32207

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: WILLIAM O LEAL

P

04/18/2005

Electronic Signature of Signing Officer or Director

Date