## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000090384

Entity Name: FLORIDA QUALIFIERS INC.

FILED Jan 12, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

29157 S.W. 186 AVENUE HOMESTEAD, FL 33030

Current Mailing Address: New Mailing Address:

29157 S.W. 186 AVENUE HOMESTEAD, FL 33030

FEI Number: 06-1655993 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIVERO, LUIS J ESQ. 782 N.W. 42 AVENUE SUITE 534 MIAMI, FL 33126 US BOND, THOMAS L PD 29157 S.W. 186 AVENUE HOMESTEAD, FL 33030 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: THOMAS L. BOND 01/12/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 BOND, THOMAS
 Name:
 BOND, THOMAS L

 Address:
 29157 S.W. 186 AVENUE
 Address:
 29157 S.W. 186 AVENUE

 City-St-Zip:
 HOMESTEAD, FL 33030 US
 City-St-Zip:
 HOMESTEAD, FL 33030 US

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: THOMAS L. BOND PD 01/12/2005