## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000095603

GREENACRES, FL 33463

City-St-Zip:

FILED Jul 26, 2005 Secretary of State

Entity Nai	me: NCT PAII	NTING SERVICES, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3431 COMMODORE COURT WEST PALM BEACH, FL 33411				9109 DUPONT PLACE WELLINGTON, FL 33414		
Current M	lailing Addres	ss:	New Maili	New Mailing Address:		
3431 COMMODORE COURT WEST PALM BEACH, FL 33411				9109 DUPONT PLACE WELLINGTON, FL 33414		
FEI Number:	: 05-0532777	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
9109 DUP	Z, NESTOR ONT PLACE TON, FL 3341	4 US				
	named entity : e of Florida.	submits this statement for the	purpose of changing i	ts registered offi	ce or registered agent, or both,	
SIGNATUR	RE:					
	Electror	nic Signature of Registered Ac	gent		Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () CHERREZ, NE 9109 DUPONT WELLINGTON,	PLACE	Title: Name: Address: City-St-Zip:	()C	hange()Addition	
Title: Name: Address: City-St-Zip:	VP ( ) GALEANEZ, DA 5868 S. 37TH S GREENACRES	STREET	Title: Name: Address: City-St-Zip:	T (X) C GALDANEZ, DAVI 5868 S. 37TH STE GREENACRES, F	REET	
Title: Name: Address: City-St-Zip:	T (X MORALES, JOI 9512 SW 1ST I GREENACRES	PLACE	Title: Name: Address: City-St-Zip:	()0	hange()Addition	
Title: Name:	S () GALEANEZ, EN		Title: Name:	S (X) C CARLOS, MORAL		

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.

City-St-Zip:

SIGNATURE: NESTOR CHERREZ Ρ 07/26/2005

GREENACRES, FL 33463