


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90196 001 ***150.00
05-03-2005 90196 002 *****8.75

DOCUMENT # P02000106569		
1. Entity Name ATRIS & KAZBOUR CORPORATION		

Principal Place of Business 4971 COUNTRY MEADOWS BLVD. SARASOTA, FL 34235 US	Mailing Address 4971 COUNTRY MEADOWS BLVD. SARASOTA, FL 34235 US
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2. Principal Place of Business 4802-51ST ST. W.	3. Mailing Address 4802-51ST ST. W.
Suite, Apt. #, etc. #803	Suite, Apt. #, etc. #803

City & State BRADENTON FL	City & State BRADENTON FL
Zip 34210	Zip 34210
Country US	Country US

04072005 Chg-P CR2E034 (10/03)



4. FEI Number 55-0801559	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KAZBOUR, AHMAD J 4971 COUNTRY MEADOWS BLVD. SARASOTA, FL 34235		7. Name and Address of New Registered Agent Name ALI ATRIS Street Address (P.O. Box Number is Not Acceptable) 4802-51ST ST. W. #803 City BRADENTON FL Zip Code 34210	
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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 *Ali Atris* DATE 4/21/2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	<input checked="" type="checkbox"/> Delete KAZBOUR, AHMAD J 4971 COUNTRY MEADOWS BLVD. SARASOTA, FL 34235	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S,T	<input checked="" type="checkbox"/> Delete KAZBOUR, AHMAD J 4971 COUNTRY MEADOWS BLVD. SARASOTA, FL 34235	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE C	<input checked="" type="checkbox"/> Delete ATRIS, SAMIRA A 7909 WISCONSIN ST. DEARBORN, MI 48126	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE P	<input checked="" type="checkbox"/> Delete ATRIS, SAMIRA A 7909 WISCONSIN ST. DEARBORN, MI 48126	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP	<input type="checkbox"/> Delete ATRIS, ALI 7909 WISCONSIN ST. DEARBORN, MI 48126	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition P/S/T/D 4802-51ST ST. W. #803 BRADENTON FL 34210	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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.

SIGNATURE: *Ali Atris* DATE 4/21/05 (941) 795-4542
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR