2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111057

Entity Name: CASHNVEST, INC

City-St-Zip:

CAPE CORAL, FL 33914

FILED Jan 26, 2005 Secretary of State

Littly Na	IIIE. CASIIIV	LST, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	ORADO PKW RAL, FL 33914					
Current Mailing Address:			New Mailing Address:			
	ORADO PKW RAL, FL 33914					
FEI Number	: 22-3879206	FEI Number Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Desir	red ()
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	ew Registered Agent:	:
2309 EL D	R, MICHAEL ORADO PKW' RAL, FL 33914					
	named entity s e of Florida.	submits this statement for the p	ourpose of changing it	s registered of	fice or registered agent	t, or both,
SIGNATUI	RE:					
	Electron	ic Signature of Registered Age	ent		Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES	TO OFFICERS AND D	IRECTORS:
Title: Name: Address: City-St-Zip:	D () SIBILAK, FRAN 5035 20TH PLA CAPE CORAL,	CE S.W.	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	RUESTER, KAF	OO PKWY. WEST	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address:	ST () REUESTER, DA		Title: Name:	ST (X) RUESTER, DAG		

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: CAPE CORAL, FL 33914

SIGNATURE: DAGMAR RUESTER S 01/26/2005