


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 14, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000127925</b> 1. Entity Name EGLOBAL BUSINESS SOLUTIONS, INC.	
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Principal Place of Business 251 BAYOU CIRCLE DEBARY, FL 32713	Mailing Address 251 BAYOU CIRCLE DEBARY, FL 32713
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01042005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 11-3666673	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
CRAIN, EDWIN L  
251 BAYOU CIRCLE  
DEBARY, FL 32713

**DO NOT WRITE  
IN THIS SPACE**

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 Edwin L. Crain Pres. EDWIN L. CRAIN 1-4-05  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CRAIN, EDWIN L 251 BAYOU CIRCLE DEBARY, FL 32713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD CRAIN, DONNA M 251 BAYOU CIRCLE DEBARY, FL 32713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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1100000180681  
01/14/05-80016-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

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: Edwin L. Crain EDWIN L. CRAIN Pres. 1-4-05 386-668-0759  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #