## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 27, 2005 08:00 AM Secretary of State

ANNOAL REPORT				Apr 27, 2005 voicu A			
1. Entity Nam	MENT # P020001354				retary o		
	ce of Business MAITLAND AVENUE FL 32751	Mailing Address 471 NORTH MAITLAND AVENU MAITLAND, FL 32751	E	1 10 11 10 11 11 11		·	1000 151001 11 CCC
			र प्रशासन्तरक क्षेत्र <u>ए</u> व				
-	A NOT MOITE	~ <b>-</b>	01062005	No Chg-P	CR2E034 (10)	/03)	
DO NOT WRITE IN THIS SPAC			CE	FEI Number 20-1115     Certificate of	674 Status Desired	\$8.75	Applied For Not Applicable Additional
	6. Name and Address of Current Re	gistered Agent		 	The state of the s	) es tie	, , , , , , , , , , , , , , , , , , , ,
MENCIS, CHRISTOPHER J 471 NORTH MAITLAND AVENUE MAITLAND, FL 32751			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for if tions of registered agent.	ë purpose of changing its register	ed öffice or register	red agent, or both,	, in the State of Flo	rlda. I am familiar	with, and accept
SIGNATURE	Signature, typed of printed name of registered agent and	What controls OVIE September	id Agent signatura required	i when reinstalled	<del></del> -	DATE	<del>,                                     </del>
FILE NOWILL REF IS \$450.00 9. Election Campaign Financing				.00 May Be			•
10,	OFFICERS AND DI	RECTORS			enter depris		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENCIS, CHRISTOPHER J 471 NORTH MAITLAND AVENUE MAITLAND, FL 32751				0000003 04/27/05-6	 335272 30077-019	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		= · · · · · · · · · · · · · · · · · · ·					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				***	NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				=IN T	'HIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS		<del></del> <del></del>					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 trastee 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 an other like empowered.

4/22/05 Date

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR