## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000002668

Entity Name: RAFFINA HOMES, INC.

FILED Jan 11, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
3021 BEAC	H PARKWAY AL, FL 33914				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
3021 BEACH PARKWAY WEST CAPE CORAL, FL 33914					
FEI Number:	55-0825394	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:  BUTT, RAFFINA 3021 BEACH PARKWAY WEST. CAPE CORAL, FL 33914 US					
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.					
SIGNATUR	E:				
	Electroni	Signature of Registered Agent	t	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		Delete RKWAY WEST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () BUTT, RAFFINA 3021 BEACH PA CAPE CORAL, F		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	EVD ( ) I BUTT, SHAHEEN 3021 BEACH PA CAPE CORAL, F	RKWAY WEST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () SHAHEEN, OZAN 3021 BEACH PA CAPE CORAL, F	′R RKWAY WEST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD () SHAHEEN, FARE 3021 BEACH PA CAPE CORAL, F	RKWAY WEST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () I SIMPSON, GREG 3021 BEACH PA CAPE CORAL, F	RKWAY WEST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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.

SIGNATURE: SHAHEEN BUTT VED 01/11/2005