2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004312

FILED Mar 10, 2005 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|--|--|--------------------------------|---|--|--|
| | LEW DRIVE PRINGS, FL 3: | 8890 | | | |
| Current Mailing Address: | | | New Mailing Addre | New Mailing Address: | |
| 2855 KERLEW DRIVE ZOLFO SPRINGS, FL 33890 | | | P.O. BOX 220 ZOLFO SPRINGS, F | P.O. BOX 220 ZOLFO SPRINGS, FL 33890 | |
| FEI Number: | : 02-0674527 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | l Address of C | urrent Registered Agent: | Name and Address | Name and Address of New Registered Agent: | |
| | EMILIO LEW DRIVE PRINGS, FL 3: | 8890 US | | | |
| | named entity : e of Florida. | submits this statement for the | purpose of changing its register | ed office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Electror | ic Signature of Registered A્ | gent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D () JUAREZ, EMIL 2855 KERLEW ZOLFO SPRING | DRIVE | 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: EMILIO JUAREZ D 03/10/2005