2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2005 08:00 AM Secretary of State

1. Entity Name	ENT # P030000642	7			560	cretary of Sta
2330 NW 154TH OPA LOCKA, FL	H STREET 2	2330 NW 154TH STREET PA LOCKA, FL 33054		O SERVINENT AN O	ielbe aan Ebar Bear belik en	IIII EBINE BIN SIBIB KEN IBBIBBI N'IBBI
	NOT WRITE II		CE	04272005 4. FEI Number 37-1455	No Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
BROWN, CU 2330 NW 154 OPA LOCKA	4TH STREET	stered Agent			NOT WE	
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 Signature, yield or printed name of registered agent and title if applicable. [NDTE. Registered Agent signature required when reinstating) DATE						
FILE ? After May	NOW!!! FEE IS \$150.00 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		00 May Be ed to Fees	000000 04/30/05-	345885 80054-004 158.75
NAME B STREET ADDRESS 2:	OFFICERS AND DIRE STD ROWN, CÜRNIS 330 NW 154TH STREET PA LOCKA, FL 33054	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WF	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	-	±				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
of the corner	tify that the information supplied with this this report or supplemental report is true ration or the receiver or trustee empowers on an attachment with an address, with a	ad to avecute this report as recu	ired by Chapter 607	ction 119.07(3)(i) sama legal effect 7, Florida Statules), Florida Statutes. I fu as if made under oat a; and that my name a	rther certify that the information h; that I am an officer or director
SIGNATURE: WARRING OFFICER OR DIRECTOR CUM 15 BROWN 4/27/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CUM Devicing Phone 4						