## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 💢

FILED Jan 13, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P030000121	18			56	cretary of State
7542 CAPRI	e of Business O DRIVE EACH, FL 33437	Mailing Address 7542 CAPRIO DRIVE BOYNTON BEACH, FL 33437			₹ ; -	
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent				01102005 4. FEI Numb 13-417	No Chg-P	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required
7542 CAP	ER, MOSHE RIO DRIVE N BEACH, FL 33437	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  Signature, typed or printed name of registered agent and fills if applicable. (NOTE, Registered Agent signature required when reinstating)  PATE  FILE NOW!!! FEE IS \$150.00  9. Election Campalgn Financing \$5.00 May Be After May 1, 2005 Fee will be \$550.00  Trust Fund Contribution.  Added to Fees						
After Ma	ay 1, 2005 Fee will be \$550.00	Trust Fund Contribution.	☐ Add	ed to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS SCHNEIDER, MOSHE 7542 CAPRIO DRIVE BOYNTON BEACH, FL 33437	:			U0000 01/13/05	0179901 -80028-004 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SF	PACE
TITLE NAME STREET ADDRESS CITY - ST- ZIP			·- <u>-</u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
<ol> <li>I hereby of indicated of the concentration.</li> </ol>	certify that the information supplied with the on this report or supplemental report is trul poration or the receiver of trustee empower or on an attachment with an address, with	filling does not quality for the exert and accurate and that my signated to execute this report as required at other like empowered.	mption stated in Secure shall have the secure 607	ction 119.07(3) same legal effect, Florida Statute	(i), Florida Statutes. I ct as if made under c es; and that my name	further certify that the information path; that I am an officer or director appears in Block 10 or Block 11 if