## **2005 FOR PROFIT CORPORATION**

**FILED** AM

	ANNUAL	REPORT			😘 Mar i	21, 200	<b>05 08:00</b> .
1. Entity Nam	MENT # P03000015					y of State	
•	e of Business 129TH STREET 13186	Mailing Address 14532 S.W. 129TH STREET MIAMI, FL 33186		1100	it din kan titir nakk nakti nak	IYI <b>XIL</b> IBI (IZNI NIIJN	ifizik while (kulour () Jewi
С	OO NOT WRITE		CE	03172005 4. FEI Numb 56-232		CR2E034	tildy milite illesants it tame
	6. Name and Address of Current R	legistered Agent					
CAGLE, P 6701 SUN MIAMI, FL	SET DRIVE #112	DO NOT WRITE IN THIS SPACE					
the obligat	named entity submits this statement for flons of registered agent.	the purpose of changing its register	red office or register	red agent, or bo	oth, in the State of Flo	orida. I am fam	illar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent an	nd Little if applicable (NOTE. Register	ed Agent signature required	d when reinstating)	<del></del>	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				.00 May Be led to Fees	U00000; 03/21/05-	271808 80060-01	6 150.00
10. TILE	OFFICERS AND D	DIRECTORS	-				
NAME STREET ADDRESS CITY-ST-ZIP	HUGHES, JAMES R JR. 13300 S.W. 101ST STREET MIAMI, FL 33186					<del></del> .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUGHES, KELLY A 13300 SW 101ST ST. MIAMI, FL 33136	<u>-</u>					
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					3		٠ .
TITLE NAME STREET ADDRESS CITY-ST-7IP							

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

3-17-05 305-253-72-48 Dayume Phone #

CHATURE AND TYPED OR POINTED JAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_