2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 15, 2005 08:00 AM Secretary of State

	1. Entity Name	MENT # P030000166	514			Sec	cretary	oi Stau
8. The above named entity submise this statement for the purpose of changing its registered agent, or both, in the State of Florida, 1 am familiar with, and the obligations of registered agent. Signature, typed contribute aware displaced agent and the templace by September 7, 2005	5001 NW 22N	TZ DI	5001 NW 22ND ST	,	1 (10 20 5) 10 10 2 2 2		918) ifaya siira 2119/	CIMIN BINGONI II INNI
CAMPBELL, JONATHAN A 5001 NW 22ND ST LAUDERHILL, FL 33313 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent. SIGNATURE Signature, typed or privad name of registered agent and size it applicates. (NOTE Registered Agent cyrathure reculted when rehability) DATE FILE NOW!!! FEE IS 3150.00 Due by September 7, 2005 Trust Fund Contribution. OFFICERS AND DIRECTORS TITLE DP CAMPBELL, JONATHAN A 5001 NW 22ND ST LAUDERHILL, FL 33313 TITLE DV CAMPBELL, ERLENE H 5001 NW 22ND ST LAUDERHILL, FL 33313 TITLE NAME SITERT ADDRESS CAMPBELL, ERLENE H 5001 NW 22ND ST LAUDERHILL, FL 33313 TITLE NAME STREET ADDRESS LAUDERHILL, FL 33313				CF	4. FEI Numb 06-167	No Chg-P er 8148	CR2E034 (10	Applied For Not Applicable 5 Additional
THE Obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NOTE Registered Agent signature resulted when reinstaling) Due by September 7, 2005 10. OFFICERS AND DIRECTORS TITLE DP CAMPBELL, JONATHAN A SIRET ADDRESS CITY-ST-7IP LAUDERHILL, FL 33313 TITLE DV CAMPBELL, ERLENE H SIRET ADDRESS SIRET ADDRE	5001 NW 2: LAUDERHI	., JONATHAN A 2ND ST LL, FL 33313		-				
Trust Fund Contribution. Added to Fees corporation did not receive the prior notion of the prior notion o	the obligation	ons of registered agent.				th, in the State of Floric		with, and accept
TITLE CAMPBELL, JONATHAN A STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL 33313 TITLE CAMPBELL, ERLENE H STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL 33313 TITLE STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL 33313 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE THE TAMBER STREET ADDRESS THE TAMBER STREET	-					In accordance with corporation did no	h s. 607.193(2 ot receive the	2)(b), F.S., the prior notice.
TITLE NVAME STREET ADDRESS CITY-ST-ZIP TITLE	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP CAMPBELL, JONATHAN A 5001 NW 22ND ST LAUDERHILL, FL 33313 DV CAMPBELL, ERLENE H 5001 NW 22ND ST	RECTORS			HAAAA A8/15/05-8	976498 80008-000	3 150.00
16AMC	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	LAUDERHILL, FL 33313				i	, - ,	
STREET ADDRESS CHY-ST-ZIP TILE NAME STREET ADDRESS CHY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS			-				
TITLE NAME STREET ADDRESS CITY-ST ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of this report of 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 of the corporation or the reporter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Blochanged, or on an attachmic plant that an address, with all other like empowered.	TITLE NAME STREET ADDRESS GITY-ST-ZIP	ertify that the information supplied with t on this report of supplemental report is t	his filing does not qualify for the exe rue and accurate and that my signs	emption stated in Stuties shall have the	ection 119.07(3) same legal effe	(ī), Florida Statutes. I fu	urther certify that th; that I am an	at the information officer or director