

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022359

Entity Name: CONSERVA CORP.

FILED
May 11, 2005
Secretary of State

Current Principal Place of Business:

1923 MEARS PKWY.
MARGATE, FL 33063 US

New Principal Place of Business:

P.O. BOX 935111
MARGATE, FL 33093 US

Current Mailing Address:

1923 MEARS PKWY.
MARGATE, FL 33063 US

New Mailing Address:

P.O. BOX 935111
MARGATE, FL 33093 US

FEI Number: 55-0820313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSERVA, RAMON
1923 MEARS PKWY.
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

CONSERVA, RAMON
P.O. BOX 935111
MARGATE, FL 33093 US

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.

SIGNATURE:

05/11/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CONSERVA, RAMON
Address: 1923 MEARS PKWY.
City-St-Zip: MARGATE, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONSERVA, RAMON
Address: P.O. BOX 935111
City-St-Zip: MARGATE, FL 33093 US

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: RAMON CONSERVA

P

05/11/2005

Electronic Signature of Signing Officer or Director

Date