2005 FOR PROFIT GORPORATION ANNUAL REPORT

FILED Mar 14, 2005 08:00 AM

1. Entity Nam	MENT # P03000037	284		Secretary of S	tate
Principal Place 11761 SW 1 MIAMI, FL 3		Mailing Address 11761 SW 172 STREET MIAMI, FL 33177			
	OO NOT WRITE	IN THIS SPA	CE	01242005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied Not Appl 5. Certificate of Status Desired \$8.75 Additional Fee Required	licable
SMALL, BI 11761 SW MIAMI, FL	/ 172 STREET	legistered Agent		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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0			JOO May Be led to Fees	
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D SMALL, BRU 11761 SW 172 STREET MIAMI, FL 33177	DIRECTORS		03/14/05-80049-024 150.0	
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE					
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>.</u>	- many and state of the			
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 fusetee 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 either like empowered. SIGNATURE:					
	SIGNATURE AND TYPED OR PR	INTED NAME OF SIGNING OFFICER OR DIRECT	TOR	O Date Daytime Phone #	