

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037303

FILED  
Apr 30, 2005  
Secretary of State

**Entity Name:** HOLLINGSWORTH WEALTH MANAGEMENT GROUP, INC.

**Current Principal Place of Business:**

4000 TOWERSIDE TERRACE  
SUITE 303  
MIAMI SHORES, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

4000 TOWERSIDE TERRACE  
SUITE 303  
MIAMI SHORES, FL 33138

**New Mailing Address:**

**FEI Number:** 65-1181312

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOLLINGSWORTH, J. ENRIQUE PRES  
4000 TOWERSIDE TERRACE  
SUITE 303  
MIAMI SHORES, FL 33138 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: HOLLINGSWORTH, J. ENRIQUE  
Address: 4000 TOWERSIDE TERRACE SUITE 303  
City-St-Zip: MIAMI SHORES, FL 33038

Title: V ( ) Delete  
Name: VASQUEZ, SILVIA  
Address: 1701 NE 115TH ST, APT 15A  
City-St-Zip: MIAMI, FL 33181

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: J. ENRIQUE HOLLINGSWORTH

PSTD

04/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date