


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000048151**  
1. Entity Name  
VIRGIN'S GRADING SERVICES, INC.



Principal Place of Business      Mailing Address  
9001 PITT ROAD                      9001 PITT ROAD  
PLANT CITY, FL 33567                PLANT CITY, FL 33567



03242005    No Chg-P    CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
56-2336410                      Not Applicable

5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
VIRGIN, JANICE K  
9001 PITT ROAD  
PLANT CITY, FL 33567

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

|                |                      |
|----------------|----------------------|
| TITLE          | PTD                  |
| NAME           | VIRGIN, JANICE K     |
| STREET ADDRESS | 9001 PITT ROAD       |
| CITY-ST-ZIP    | PLANT CITY, FL 33567 |
| TITLE          | VSD                  |
| NAME           | VIRGIN, DARRYL D     |
| STREET ADDRESS | 9001 PITT ROAD       |
| CITY-ST-ZIP    | PLANT CITY, FL 33567 |
| TITLE          |                      |
| NAME           |                      |
| STREET ADDRESS |                      |
| CITY-ST-ZIP    |                      |
| TITLE          |                      |
| NAME           |                      |
| STREET ADDRESS |                      |
| CITY-ST-ZIP    |                      |

**DO NOT WRITE  
IN THIS SPACE**

00000231803  
04/07/2005-80044-020 150.00

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.

SIGNATURE: *Janice K. Virgin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-5 (813) 967-2537  
Date      Daytime Phone #