

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000059448

**FILED**  
**May 09, 2005**  
**Secretary of State****Entity Name:** RAZBERRY, INC.**Current Principal Place of Business:**645 VALHALLA WAY, APT. 113  
LAKE MARY, FL 32746**New Principal Place of Business:**77360 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036**Current Mailing Address:**645 VALHALLA WAY, APT. 113  
LAKE MARY, FL 32746**New Mailing Address:**PO BOX 544  
ISLAMORADA, FL 33036**FEI Number:** 81-0617307**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BRAGASSA, HELEN  
645 VALHALLA WAY, APT. 113  
LAKE MARY, FL 32746 US**Name and Address of New Registered Agent:**BRAGASSA, HELEN  
PO BOX 544  
ISLAMORADA, FL 33036 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: HELEN BRAGASSA

05/09/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BRAGASSA, HELEN  
Address: 645 VALHALLA WAY, APT. 113  
City-St-Zip: LAKE MARY, FL 32746

Title: PRES ( ) Delete  
Name: WAGNER, ROBERT C PRES  
Address: 104 ATLANTIC LANE  
City-St-Zip: ISLAMORADA, FL 33036

Title: VP ( ) Delete  
Name: WAGNER, DANIEL D VP  
Address: 785 ISLAND CT  
City-St-Zip: COLUMBUS, OH 43214

Title: SEC ( ) Delete  
Name: WAGNER, STEVENTON S SEC  
Address: 691 SPRINGS  
City-St-Zip: COLUMBUS, OH 43214

Title: TRES ( ) Delete  
Name: BRAGASSA, HELEN M TRES  
Address: 645 VALHALLA WAY #113  
City-St-Zip: LAKE MARY, FL 32746

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

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

Title: PRES (X) Change ( ) Addition  
Name: BRAGASSA, HELEN PRES  
Address: PO BOX 544  
City-St-Zip: ISLAMORADA, FL 33036

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

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: HELEN BRAGASSA

PRES

05/09/2005

Electronic Signature of Signing Officer or Director

Date