2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Jun 24, 2005 8:00 am **Secretary of State** DOCUMENT # P03000073702 1. Entity Name 06-06-2005 90001 046 *****8.75 PASLEY INC. 06-24-2005 90002 036 ***141.25 Principal Place of Business Mailing Address 14535 BRUCE B DOWNS BLVD UNIT 2331 TAMPA FL 33613 14535 BRUCE B DOWNS BLVD UNIT 2331 **TAMPA FL 33613** A LITERARRA (IN REPURDAMEN DOME DOME RAMIL RAMIL RAMIL MARIA ERRA MARRAL MENERA PER LA PROPERTI PER LA PROPERT 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite Ant #. etc. 1st MOORE CR2E034 (10/04) 4. FEI Number Applied For City & State City & State 14-1891920 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PASLEY, LAURA M 14535 BRUCE-B DOWNS BLVD UNIT 2331 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33613** City Zip Code 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 provided neme of registered agent and life if applicable (NOTE: Registered Agent signature required when ministeling) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE Addition | PASLEY, LAURA M NAME NAME STREET ADDRESS 14535 BRUCE B DOWNS BLVD UNIT 2331 STREET ADDRESS TAMPA FL 33813 CITY-ST-ZIP CITY - ST - 71P MEE Delete TITLE ☐ Change Addition WILSON, TARA'A NAME NAME STREET ADDRESS 8408 CERRO CIRCLE APT 244 STREET ADDRESS C/TY-51-7IP **TAMPA FL 33617** CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-74P nur HILE Change -Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE Change ☐ Addition TITLE Detete MARKET NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-70P ☐ Addition Defete TITLE ☐ Change DILE NAME STREET ADDRESS STREET ADDRESS CITY-ST- 7IP CITY-ST-ZIP 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

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