

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094393

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: GREEN LIGHT PROPERTY INSPECTIONS INC

**Current Principal Place of Business:**

% 16060 SOUTH POST ROAD APT 204  
WESTON, FL 33331

**New Principal Place of Business:**

30 MADRID LANE  
DAVIE, FL 33324

**Current Mailing Address:**

% 16060 SOUTH POST ROAD APT 204  
WESTON, FL 33331

**New Mailing Address:**

30 MADRID LANE  
DAVIE, FL 33324

FEI Number: 80-0075509

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

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

GONZALEZ, JASON E  
30 MADRID LANE  
DAVIE, FL 33324 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: JASON GONZALEZ

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: GONZALEZ, JASON  
Address: 16060 SOUTH POST ROAD APT. 204  
City-St-Zip: WESTON, FL 33331 US

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

Title: VP (X) Change ( ) Addition  
Name: GONZALEZ, JASON  
Address: 30 MADRID LANE  
City-St-Zip: DAVIE, FL 33324 US

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: JASON GONZALEZ

MR

04/29/2005

Electronic Signature of Signing Officer or Director

Date