

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104120

Entity Name: INDCREEK PROPERTIES, INC.

FILED
Jul 20, 2005
Secretary of State

Current Principal Place of Business:

501 BRICKELL KEY DRIVE
504
MIAMI, FL 33131

New Principal Place of Business:

1155 W. 4TH STREET
SUITE 225
RENO, NV 89503

Current Mailing Address:

501 BRICKELL KEY DRIVE
504
MIAMI, FL 33131

New Mailing Address:

P.O. BOX 5241
RENO, NV 89513

FEI Number: 05-0593652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOWE, OSMOND C
Address: 501 BRICKELL KEY DRIVE, SUITE 504
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCNABOLA, JOHN P
Address: 1144 W. 4TH STREET SUITE 225
City-St-Zip: RENO, NV 89503

Title: S () Change (X) Addition
Name: MCNABOLA, JOHN P
Address: 1155 W. 4TH STREET SUITE 225
City-St-Zip: RENO, NV 89503

Title: T () Change (X) Addition
Name: MCNABOLA, JOHN P
Address: 1155 W. 4TH STREET SUITE 225
City-St-Zip: RENO, NV 89503

Title: AS () Change (X) Addition
Name: CONN, TIM
Address: 1155 W. 4TH STREET SUITE 225
City-St-Zip: RENO, NV 89503

Title: M () Change (X) Addition
Name: CONN, TIM
Address: 1155 W. 4TH STREET SUITE 225
City-St-Zip: RENO, NV 89503

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: TIM CONN

AS

07/20/2005

Electronic Signature of Signing Officer or Director

Date