2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000107507

1. Entity Name

ORANGE BLOSSOM REGIONAL, INC.



Principal Place of Business

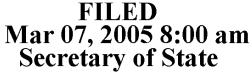
7700 NORTH KENDALL DRIVE

SUITE 809 MIAMI, FL 33156 US Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7700 NORTH KENDALL DRIVE SUITE 809

MIAMI, FL 33156 US



03-07-2005 90287 040 ***150.00

50023461



01282005

No Chg-P

CR2E034 (10/03)

4. FEI Number		Applied For		
81-0637788	[Not Applicable		
5. Certificate of Status Desired		\$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SALAZAR, GERMAN A 7700 NORTH KENDALL DRIVE **SUITE 809** MIAMI, FL 33156

SIGNATURE:

DO NOT	WRITE
IN THIS	SPACE

05

Date

305 270.3145

Daytime Phone #

			•			
	named entity submits this statement for the pations of registered agent.	ourpose of changing its registere	ed office or registered a	agent, or both, in the Sta	le of Florida. I am familiar	with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registerer	d Agent signature required when	reinstating)	DATÉ	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	scing \$5.00 Added to	May Be o Fees		
10.	OFFICERS AND DIREC	CTORS		7		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SUTHERLAND, BRAD 7700 NORTH KENDALL DRIVE, SUIT MIAMI, FL 33156	E 809				3.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST CRISLER, MICHAEL J 7700 NORTH KENDALL DRIVE, SUIT MIAMI, FL 33156	E 809				,
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TITLE				• • ;	7 *** 1 ***	
NAME STREET ADDRESS CITY-ST-ZIP				:		
of the cor	certify that the information supplied with this f I on this report or supplemental report is true poration or the receiver or truetee empowere , or on an attachment with an address, with a	d to execute this report as requi	mption stated in Section ture shall have the sam red by Chapter 607, Fig.	n 119.07(3)(i), Florida St e legal effect as if made orida Statutes; and that n	atutes. I further certify that under oath; that I am an c ny name appears in Block	the information officer or director 10 or Block 11 if