2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: FULL WELD S

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 03, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # P0300011100)5		Secretary of St	ate
7830 WILES	RD	Mailing Address 7830 WILES RD CORAL SPRINGS, FL 33067		2 7997/895 7/J 997/89 11() 88()) 88()(88()(88()(188) (188) (188) (181) 88()()(88()(88()(88()(88()(88()(88()(88()(88()(88()(88()(88	15 1 1
DO NOT WRITE IN THIS SPACE				04272005 No Chg-P CR2E034 (10/03) 4. FEI Number 20-0316359 Applied Not Appl 5. Certificate of Status Desired \$8.75 Additional Fee Required	For licable
WEISS, FF 7830 WILE CORAL SF		stereu Agent		DO NOT WRITE IN THIS SPACE	
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 printed name of registered agent and little if applicable ONOTE: Registered Agent signature required when refinating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND DIRE	CTORS			
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12. I hereby of indicated of the cor	cerify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowers	filling does not qualify for the exer and accurate and that my signated to execute this report as required.	mption stated in Secure shall have the s are of by Chapter 607	Section 119.07(3)(1), Florida Statutes. I further certify that the informe e same legal effect as if made under oath; that I am an officer or dire 07, Florida Statutes; and that my name appears in Block 10 or Block	ition actor c 11 if