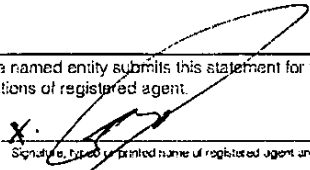
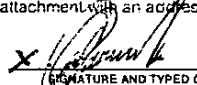


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90142 021 ***150.00

DOCUMENT # P03000113994 1. Entity Name DAPRI SERVICES, INC																							
Principal Place of Business 1813 MATTHEW LOOP CLEWISTON, FL 33440			Mailing Address 1813 MATTHEW LOOP CLEWISTON, FL 33440																				
2. Principal Place of Business 514 San Luiz Avenue		3. Mailing Address 514 San Luiz Avenue		50047030 																			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		04282005 Chg-P CR2E034 (10/03)																			
City & State Clewiston FL		City & State Clewiston FL		4. FEI Number 14-1897486																			
Zip 33440		Zip 33440		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																			
6. Name and Address of Current Registered Agent NANCY, NEIRA V 1813 MATTHEW LOOP CLEWISTON, FL 33440			7. Name and Address of New Registered Agent Name Ismael Bonilla Street Address (P.O. Box Number is Not Acceptable) 514 San Luiz Avenue City Clewiston FL Zip Code 33440																				
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 X  (NOTE: Registered Agent signature required when resigning) DATE _____																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																				
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">P,VP NANCY, NEIRA V</td> <td style="width:10%; text-align: center;">☒ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1813 MATTHEW LOOP</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>CLEWISTON, FL 33440</td> <td></td> </tr> </table>			TITLE	P,VP NANCY, NEIRA V	☒ Delete	STREET ADDRESS	1813 MATTHEW LOOP		CITY - ST - ZIP	CLEWISTON, FL 33440		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">P PAUL BONILLA</td> <td style="width:10%; text-align: center;">☐ Change ☒ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>514 San Luiz Avenue</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Clewiston FL 33440</td> <td></td> </tr> </table>			TITLE	P PAUL BONILLA	☐ Change ☒ Addition	STREET ADDRESS	514 San Luiz Avenue		CITY - ST - ZIP	Clewiston FL 33440	
TITLE	P,VP NANCY, NEIRA V	☒ Delete																					
STREET ADDRESS	1813 MATTHEW LOOP																						
CITY - ST - ZIP	CLEWISTON, FL 33440																						
TITLE	P PAUL BONILLA	☐ Change ☒ Addition																					
STREET ADDRESS	514 San Luiz Avenue																						
CITY - ST - ZIP	Clewiston FL 33440																						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Delete	STREET ADDRESS			CITY - ST - ZIP			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Change ☒ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>ISMAEL BONILLA</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>514 San Luiz Avenue</td> <td></td> </tr> </table>			TITLE	NAME	☐ Change ☒ Addition	STREET ADDRESS	ISMAEL BONILLA		CITY - ST - ZIP	514 San Luiz Avenue	
TITLE	NAME	☐ Delete																					
STREET ADDRESS																							
CITY - ST - ZIP																							
TITLE	NAME	☐ Change ☒ Addition																					
STREET ADDRESS	ISMAEL BONILLA																						
CITY - ST - ZIP	514 San Luiz Avenue																						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Delete	STREET ADDRESS			CITY - ST - ZIP			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP		
TITLE	NAME	☐ Delete																					
STREET ADDRESS																							
CITY - ST - ZIP																							
TITLE	NAME	☐ Change ☐ Addition																					
STREET ADDRESS																							
CITY - ST - ZIP																							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Delete	STREET ADDRESS			CITY - ST - ZIP			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP		
TITLE	NAME	☐ Delete																					
STREET ADDRESS																							
CITY - ST - ZIP																							
TITLE	NAME	☐ Change ☐ Addition																					
STREET ADDRESS																							
CITY - ST - ZIP																							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Delete	STREET ADDRESS			CITY - ST - ZIP			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%; text-align: center;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS			CITY - ST - ZIP		
TITLE	NAME	☐ Delete																					
STREET ADDRESS																							
CITY - ST - ZIP																							
TITLE	NAME	☐ Change ☐ Addition																					
STREET ADDRESS																							
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)(f), 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 an address, with all other like empowered.																							
SIGNATURE: X  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date _____ Daytime Phone # _____																							