## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000128966

Entity Name: BEYOND ACCOUNTING & BOOKKEEPING, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

33 SE 1ST AVE., STE 102 1801 S FEDERAL HWY

DELRAY BEACH, FL 33444 STE 238
DELRAY BEACH, FL 33483

Current Mailing Address: New Mailing Address:

33 SE 1ST AVE., STE 102 1801 S FEDERAL HWY DELRAY BEACH, FL 33444 STE 238

DELRAY BEACH, FL 33483

FEI Number: 35-2219066 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STEWART, JAYNE M
33 SE 1ST AVE.
#102

STEWART, JAYNE M
1801 S FEDERAL HWY
STE 238

DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33483 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: JAYNE M. STEWART 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PTD (X) Change () Addition

 Name:
 SIGONA, DANTE E
 Name:
 SIGONA, DINEEN E

 Address:
 631 LINNET CIRCLE
 Address:
 631 LINNET CIRCLE

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:
 DELRAY BEACH, FL 33444

Title: CEO ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STEWART, JAÝNE M
 Name:

 Address:
 631 LINNET CIRCLE
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 STEWART, JAYNE M
 Name:

 Address:
 631 LINNET CIRCLE
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:

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: DINEEN SIGONA P 04/29/2005