## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 09, 2005 08:00 AM Secretary of State

1. Entity Nan	MENT # P0300014277	71 			Secretary of State	
2024 BRIDA	AL RD	Aailing Address 2024 BRIDAL RD FERNANDINA BCH, FL 32034			I NEWS NOISE HAVE BYENG HAVE NOOT STEEL CENTER IN CRUIS	
E	OO NOT WRITE I		CE	02042005 No Cho 4. FEI Number 56-2422461 5. Certificate of Status De	Applied For   Not Applicable	
6. Name and Address of Current Registered Agent THOMAS, JAMES M 2024 BRIDAL RD FERNANDINA BEACH, FL 32034				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 this if applicable (NOTE Registered Agent signature regulated when refinstating)  DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financ Trust Fund Contribution  10. OFFICERS AND DIRECTORS				00 May Be ed to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D THOMAS, JAMES 2024 BRIDAL RD FERNANDINA BCH, FL 32034	CIOHS		U	00000256770 9/05-80027-019 150.00	
STREET ADDRESS CITY-ST-ZIP TITLE NAME , STREET ADDRESS CITY-ST-ZIP				DO NOT		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · ·		IN THIS	SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<del></del>	<del></del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·	
12. I hereby of indicated of the corporated,	certify that the information supplied with this f on this report or supplemental report is true poration or the receiver or trustee empowere or on an attachment with an address, with a	iling does not qualify for the exer and accurate and that my signat d to execute this report as requir I other like empowered.	nption stated in Sec ure shall have the s ed by Chapter 607	ction 119.07(3)(I), Florida Sta ame legal effect as if made . Florida Statutes; and that m	atutes. I further certify that the information under oath; that I am an officer or director ny name appears in Block 10 or Block 11 if	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR