


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 04, 2005 8:00 am**  
**Secretary of State**

03-04-2005 90094 004 \*\*\*150.00

<b>DOCUMENT # P03000148847</b>	
1. Entity Name <b>AGHREE, INC.</b>	

Principal Place of Business <b>P.O. BOX 160207 ALTAMONTE SPRINGS, FL 32716-0207 US</b>	Mailing Address <b>P.O. BOX 160207 ALTAMONTE SPRINGS, FL 32716-0207 US</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



03022005 Chg-P CR2E034 (10/03)

4. FEI Number <b>APPLIED FOR 43-2063057</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

<b>6. Name and Address of Current Registered Agent</b>
<b>ROY, WILLIAM GLENN JR ESQ 411 W CENTRAL PKWY ALTAMONTE SPRINGS, FL 32714</b>

<b>7. Name and Address of New Registered Agent</b>
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D WADE, APRILLE D</b> <b>P.O. BOX 160207</b> <b>ALTAMONTE SPRINGS, FL 327160207</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P/T ROBERT R. REESS</b> <b>1000-243 WINDERLEY PLACE</b> <b>MAITLAND, FL 32751</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V/S FATMA COOVER REESS</b> <b>1000-243 WINDERLEY PLACE</b> <b>MAITLAND, FL 32751</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Robert R. Reess, President*

ATTACHMENT

#P03000148847

50023578  
AGHREE, INC

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P.O. Box 160207, Altamonte Springs, FL 32716-0207

[www.WeAghree.com](http://www.WeAghree.com)

March 2, 2005

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern;

Enclosed is the annual report for Aghree, Inc. The FEIN is 43-2063057 and is printed on the report.

My concern is about filling out the remainder of the form. Robert R. Reess, 1000-243 Winderley Place, Maitland, FL 32751 is now the President/Treasurer. Fatma Coover Reess is now the Vice President/Secretary. Aprille D. Wade is no longer a Director of Aghree, Inc. Although I was not sure, I "X" ed the Addition Block for both Robert R. Reess and Fatma Coover Reess as new officers of the corporation. I believe that I have appropriately "X" ed Delete for Aprille D. Wade who is no longer an officer/director.

I have signed the report as President. If there are any other necessary requirements, please contact me via email ([Bob@BobReess.com](mailto:Bob@BobReess.com)), phone or mail. I have enclosed check # 1004 in the amount of \$150.00.

Thank you for your immediate attention to this filing.

Respectfully,



Robert R. Reess

[www.Aghree.com](http://www.Aghree.com)

407.834.3929

[www.AghreeInc.com](http://www.AghreeInc.com)