
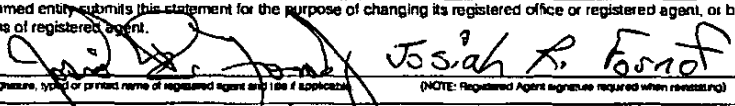
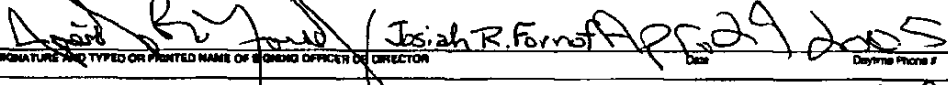


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

5/ **FILED**  
**Jun 23, 2005 8:00 am**  
**Secretary of State**  
05-03-2005 90163 020 \*\*\*158.75

<b>DOCUMENT # P04000017503</b>					
1. Entity Name <b>JOSIAH R FORNOF INC.</b>					
Principal Place of Business <b>18060 OWEN DRIVE HUDSON, F. 34667 US</b>			Mailing Address <b>18060 OWEN DRIVE HUDSON, F. 34667 US</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. Fee Number <b>841634803</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>FORNOF, JOSIAH R 18060 OWEN DRIVE HUDSON, FL 34667</b>			7. Name and Address of New Registered Agent		
			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  <b>Josiah R. Fornof</b> DATE <b>Apr 29 2005</b>					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	TITLE	NAME	STREET ADDRESS
	<b>President</b>	<b>Josiah R. Fornof</b>			
		<b>18060 Owen Dr.</b>			
		<b>Hudson, FL 34667-6659</b>			
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:  <b>Josiah R. Fornof</b> DATE <b>Apr 29 2005</b>					

727 213-4781