

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025730

FILED
Apr 20, 2005
Secretary of State

Entity Name: PICKWICK PAPERS PLUS, INC.

Current Principal Place of Business:

300 NE 71ST ST., SUITE 520
MIAMI BCH, FL 33141

New Principal Place of Business:

300 71ST ST.
SUITE 520
MIAMI BCH, FL 33141

Current Mailing Address:

300 NE 71ST ST., SUITE 520
MIAMI BCH, FL 33141

New Mailing Address:

300 71ST ST.
SUITE 520
MIAMI BCH, FL 33141

FEI Number: 13-4274514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, LEONARD
300 NE 71ST ST., SUITE 520
MIAMI BCH, FL 33141 US

Name and Address of New Registered Agent:

JACOBS, LEONARD
300 71ST ST.
SUITE 520
MIAMI BCH, FL 33141 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:

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACOBA, LEONARD
Address: 300 NE 71ST ST., SUITE 520
City-St-Zip: MIAMI BCH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JACOBS, LEONARD
Address: 300 71ST ST., SUITE 520
City-St-Zip: MIAMI BCH, FL 33141

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: LEONARD JACOBS

PD

04/20/2005

Electronic Signature of Signing Officer or Director

Date