## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000031348

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Entity Name: DDS ELEVATOR INSPECTION, INC.

FILED Apr 11, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	TGOMERY PL NTE SPRINGS				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	TGOMERY PL NTE SPRINGS				
FEI Number	r: 20-0691414	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
1840 SW 4TH FLO	& UTRERA, P 22ND ST. DR . 33145 US	A.			
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	IRE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	PSTD ( DANIELS, THO 475 MONTGO		Title: Name: Address:	( ) Change ( ) Addition	

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: THOMAS DANIELS PSTD 04/11/2005