## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 29, 2005 8:00 am Secretary of State DOCUMENT # P04000047243 04-29-2005 90290 033 \*\*\*150.00 ONE DOLLAR MANIA #2, INC. Principal Place of Business Mailing Address 14011343 15579 US HWY 19 NORTH #223 15579 US HWY 19 NORTH #223 CLEARWATER, FL 33764 CLEARWATER, FL 33764 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Ant. #. etc. 04222005 Chg-P CR2E034 (10/03) Applied For 4. FEI Number City & State City & State 00 X Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUSTIN, JOHNNY Street Address (P.O. Box Number is Not Acceptable) 15579 US HWY 19 NORTH #223 CLEARWATER, FL 33764 Zip Code City FL 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE Change Addition TITI F HUSTON, JOHNNY NAME NAME STREET ADDRÉSS STREET ADDRESS 2375 TYRONE WAY CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG, FL 33710 Change D ☐ Defete TITLE Addition EOM, DARAE NAME NAME STREET ADDRESS 2375 TYRONE WAY STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST PETERSBURG, FL 33710 Addition ☐ Delete TITLE [ ] Change TITLE NAME NAME

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

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