

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065776

FILED  
May 16, 2005  
Secretary of State

Entity Name: AMERICAN DREAM DEVELOPERS, INC.

## Current Principal Place of Business:

3012 18TH ST W  
LEHIGH ACRES, FL 33971

## New Principal Place of Business:

815 PONCE DE LEON BLVD  
SUITE 304  
CORAL GABLES, FL 33134 US

## Current Mailing Address:

3012 18TH ST W  
LEHIGH ACRES, FL 33971

## New Mailing Address:

815 PONCE DE LEON BLVD  
SUITE 304  
CORAL GABLES, FL 33134 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVA-MUNOZ, MARLENE  
3012 18TH ST W  
LEHIGH ACRES, FL 33971 US

## Name and Address of New Registered Agent:

WARNER, KENNETH  
815 PONCE DE LEON BLVD  
SUITE 304  
CORAL GABLES, FL 33134 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: KENNETH WARNER

05/16/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SILVA-MUNOZ, MARLENE  
Address: 3012 18TH ST W  
City-St-Zip: LEHIGH ACRES, FL 33971

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DIEZ, MARYSI  
Address: 815 PONCE DE LEON BLVD  
City-St-Zip: CORAL GABLES, FL 33134 US

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: MARYSI DIEZ

PD

05/16/2005

Electronic Signature of Signing Officer or Director

Date