

2005 FILING YEAR ANNUAL REPORT

FILED

05 FEB 23 PM 3:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02232005 No Chg-P CR2E034 (10/03) *MRS*

4. FEI Number 20-1039100 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FILIATREAU, SHAE'LE
7475 SPINOLA ROAD
JACKSONVILLE, FL 32217

DO NOT WRITE
IN THIS SPACE

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: *Shae'le Filiatreau* *2/23/05*
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when registering.) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FILIATREAU, SHAE'LE
STREET ADDRESS	7475 SPINOLA RD.
CITY-ST-ZIP	JACKSONVILLE, FL 32217
TITLE	V
NAME	BOLDEN, DURWARD E
STREET ADDRESS	7475 SPINOLA RD.
CITY-ST-ZIP	JACKSONVILLE, FL 32217
TITLE	CEO
NAME	Kristopher Thompson
STREET ADDRESS	7475 Spinola rd.
CITY-ST-ZIP	Jacksonville FL 32217
TITLE	DAVID ALVEREZ
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	mgr.
NAME	David ALVEREZ
STREET ADDRESS	7475 Spinola Rd.
CITY-ST-ZIP	Jacksonville FL 32217
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

300047981433
03/09/05-01004-015 **158.75

DO NOT WRITE
IN THIS SPACE

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: *Shae'le Filiatreau* *2/23/05* *904-448-9522*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #