## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Feb 21, 2005 8:00 am Secretary of State 02-21-2005 90053 037 \*\*\*150.00

DOCUI  1. Entity Name VICENTE													
					<del></del>		VS.	ES.		ለበበንሰሳ	) (* A		:
Principal Place of Business				Mailing Address						400202	<b>64</b>		,
154 LAKE MARGARET BLVD LAKE COMO, FL 32167				PO BOX 703 Pierson, FL 32180									
•										16    6 6   66   16	<b>         </b>	E	
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.					02152005	Chg-P	CR2E	034 (10/03)	
City & State				City & State					4. FEI Numb	er 243210	ı		plied For Applicable
Zip		Country		Zip · 5		Count	iry			of Status Desire		\$8.75 Add	itional
	6. Nam	e and Address of Cur					-		7. Name and	d Address of Ne	w Registered	Fee Required Agent	
CDICCE! (		Name	ENT	e A	GONZA	482 J	<u>ጉ</u>						
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.										er is Not Accept			
4TH FLOOR MIAMI, FL 33145							1,000				D- 4/A		
(Min 1877), 1 E 33 143						City LAKA			_	CARRY E	اديم FL	Zip Code	<u> </u>
8. The above	named enti	ity submits this materne	ent for the p	purpose of cha	anging its re	egistere			ed agent, or bo	oth, in the State o			
the obligati	ions of regis	stered agent	الك	1/2				. )		san (i 🔭 .		eg 3 <b>/</b> 1, <b>€</b>	ا نے اگرے
SIGNATURE	Signature, type	d or phinted name of registered	Jacob Little	if a policable	NOTE	Segistered	L CU	7 C	when reinstating)	120kg	DATE	2/15	<u>/.04</u> ].:_
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After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 5 Fee will be \$5	50.00	9Election Trust Fi	n Campaig und Contrib	n Finan bution.	cing 2L □		00 May Be ed to Fees		management of the particular lands		
10.	·!	OFFICERS	AND DIRE	CTORS		11.	<del></del>	'	ADDITIONS	/CHANGES TO	OFFICERS AN	D DIRECTORS	3 IN 11
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indicated of the cor	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.												
SIGNAT	URE:	- Thai		Total	<u> </u>	$\nu$	1000	en	te a	ÓW = J	6=	2/15/	35