FILED Apr 04, 2005 8:00 am Secretary of State 04-04-2005 90089 023 ***158.75

2005 FOR PROFIT CORPORATION

DOCUMENT # P04000089880 Interpolations HOLLSON INTERNATIONAL, INC. Principal Place of Business 1887 BILLY PAD CIR. FIT MEYER, FL 33907 US 1878 BILLY PAD CIR. FIT MEYER, FL 33907 US 1. April PAD CIR. FIT MEYER, FL 33907 US 2. Principal Place of Business 3. Mailling Address 1. Mailling Address 3. Mailling Address 3. Mailling Address 3. Mailling Address 4. FE Name and Address 4. FE Name and Address 5. Certificate of Season 6. Name and Address of Current Registered Agent 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Name and Address of New Registered Agent Name 1. Address	ANNUAL REPORT						04-04-2003	J000J 02.	3 130	5.75	
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HOLLAND, MARK A 13879 LILLY PAD CIRCLE FT. MYERS, FL 33907 6. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, not both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered diffice or registered agent, not both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, not both, in the State of Florida. I am familiar with, and accept the purpose of changing its registered agent, not both, in the State of Florida. I am familiar with, and accept		6. Name and Address of Current			7. Name and	Address of New R	egistered Aç	jent			
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		certify that the information supplied with	this filing does not qualify for t			ection 119.07(3)(), Florida Statutes.	I further certif	y that the in	formation	

SIGNATURE AND TOPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: __