2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Jan 07, 2005 8:00 am Secretary of State 01-07-2005 90014 023 ***150.00

DOCUMENT # P04000115763 1. Entity Name GHECKY INC.				01-07-2003	90014 023 *** 130.00	
Principal Place 15356 ALEX/ JUPITER, FL	ANDER RUN	Mailing Address 15356 ALEXANDER RU JUPITER, FL 33478	IN .		20000378	
2. Principal Pl	THE PROPERTY	3. Mailing Address Suite, Apt. #, etc.	gonder Run	01042005 Chg-P	CR2E034 (10/03)	
City & State	bar, Fl	City & State	*C	\$FEI Number 80 . 012 05 2	Applied For Not Applicable	
77478	Sountry Deach	37478	Polm April		¢0.75	
	6. Name and Address of Current F	legistered Agent		7. Name and Address of New	Registered Agent	
CORDING, JEFFREY 15356 ALEXANDER RUN JUPITER, FL 33478			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
			City		FL Zip Code	
	named entity submits this statement for ions of registered agent. Signature, typed or stipped name of registered agent a		e registered office or regist		Florida. I am familiar with, and accept	
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0		tribution.	5.00 May Be ided to Fees	· · · · · · · · · · · · · · · · · · ·	
10.	OFFICERS AND I	DIRECTORS Delete	11.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 11 Change Addition	
NAME STREET ADDRESS CITY-ST-ZIP	CORDING, AMANDA 15356 ALEXANDER RUN JUPITER, FL 33478		NAME STREET ADDRESS CITY-ST-ZIP		- , -	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORDING, JEFFREY 15356 ALEXANDER RUN JUPITER, FL 33478	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		_ Delete _	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-21P		☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
12. I hereby indicated of the co-	certify that the information supplied with d on this report or supplemental report is progration or the receiver or trustee empers, or on an attachment with an address,	this filing does not qualify for true and accurate and that be been done to execute this report with all other like empowere	or the exemption stated in my signature shall have that the discrete that the signature of the state of the s	Section 119.07(3)(i), Florida Statute le same legal effect as if made und 307, Florida Statutes; and that my n	es. I further certify that the information ler oath; that I am an officer or director ame appears in Block 10 or Block 11 if	