## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 20, 2005 8:00 am Secretary of State

Daytime Phone #

DOCUMENT # P04000119663  1. Entity Name PHOENIX DEVELOPMENT & SALES, INC.								04-20-2005 90331 036 ***150.00					
Principal Place	e of Business		Mailing Address										
511 IVY AVE		511 IVY AVE PALM BEACH GARDENS, FL 33410							5	00397	65		
2. Principal Pl	lace of Business	3. Mailin											
Suite, Apt. #, etc.			Suite,	Apt. #, etc.			04142005	Chg-P	CR2E	034 (10/03)			
City & State			City & State					4. FEI Numb	er 1 <b>5</b> 159	30	<del> </del>	plied For t Applicable	
Zip	Zip Country			Zip C			5. Certificate of Status Desired				¢9.75 additional		
				7. Name an	d Address of Nev	v Registered	Agent						
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR						Name Street Ac	بحب	55- <b>&amp;</b> P.O. Box Numt	Penno per is Not Accepta	cK able)			
MIAMI, FL 33145							11	141	Aven	ul	_		
	•		City	Pale	n Buh	Garaler	رج FL	- Zin Cood	410				
8. The above named entity submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. I am familiar with, and accept													
the obligations of registered agent.													
SignATURE Signature, Noed out inted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)										5	· · · ·		
1 's <u>-</u>	:		9.	Election Campai	on Finar	: ncina	\$5	.00 May Be					
After Ma	ey 1, 2005 F	E IS \$150.00 ee will be \$550.0		Trust Fund Cont			Add	led to Fees -		<del></del>		•	
10.		OFFICERS AND	DIRECTOR	s	11.			ADDITIONS	CHANGES TO C	OFFICERS AN	D DIRECTORS	3 IN 11	
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NAME STREET ADDRESS	511 IVY AVE		i '			ET ADDRESS						1	
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CITY-ST-ZIP				***************************************		ST-ZIP		** *******					
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.													

INTED NAME OF SIGNING OFFICER OR DIRECTOR