2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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Principal Plac	e of Business	Mailing Address		}			
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C-257X							
DELBAY BEACH FL 33483 DELFA BEACH FL 33483					<u> </u>		
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1,70	6. Name and Address of Current I	Registered Agent		7. Name and	Address of New Ri	egistered Agent	
Name Thomas N						**	ļ
MICHALS, JAY					er is Not Acceptable		
777 EAST ATLANTIC AVE						<i>-</i>	
C-257 DELRAY BEACH FL 33483				FAXRINI	e Cir		
DEL	. P.A.T. DEACH FL 33463		3909	10XDINI	<u> </u>		
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8. The above	named entity submits this statemen) for	r the purpose of changing its re	gistered office or regis	tered agent, or bo	th, in the State of Flo	rida. I am familiar with	, and accept
the obligat	ions of registered egent.		-	* **			
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SIGNATURE.	Signature, typed or printed name of teach ared agents	and title if applicable (NOTE, I	Registered Agent signature requ	ered when reinslating)		DATE	
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