

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129776

FILED
May 03, 2005
Secretary of State

Entity Name: EVERLASTING INVESTMENTS INC.

Current Principal Place of Business:

4955 SABLE PINE CIRCLE
D2
WEST PALM BEACH, FL 33417

New Principal Place of Business:

307 4TH STREET
LAKE PARK, FL 33403

Current Mailing Address:

4955 SABLE PINE CIRCLE
D2
WEST PALM BEACH, FL 33417

New Mailing Address:

307 4TH STREET
LAKE PARK, FL 33403

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAY, JOSEPH B
4955 SABLE PINE CIRCLE
D2
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

SLAY, JOSEPH B
307 4TH STREET
LAKE PARK, FL 33403 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSEPH B SLAY

05/03/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLAY, JOSEPH B
Address: 4955 SABLE PINE CIRCLE D2
City-St-Zip: WEST PALM BEACH, FL 33417

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SLAY, JOSEPH B
Address: 307 4TH STREET
City-St-Zip: LAKE PARK, FL 33403

Title: VP () Change (X) Addition
Name: SLAY, LISA A
Address: 307 4TH STREET
City-St-Zip: LAKE PARK, FL 33403

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA A SLAY

VP

05/03/2005

Electronic Signature of Signing Officer or Director

Date