2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000133394

Entity Name: A D RUFLING

FILED Sep 08, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

2189 SUNSHINE BLVD #A 1990 50TH STREET SW NAPLES, FL 34116 NAPLES, FL 34116

Current Mailing Address: New Mailing Address:

2189 SUNSHINE BLVD #A 1990 50TH STREET SW NAPLES, FL 34116 NAPLES, FL 34116

FEI Number: 84-1656954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERDOMO, ALLAN L
2189 SUNSHINE BLVD #A
NAPLES, FL 34116 US
PERDOMO, ALLAN L
1990 50TH STREET SW
NAPLES, FL 34116 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: 09/08/2005

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: P (X) Change () Addition

 Name:
 PERDOMO, ALLAN L
 Name:
 PERDOMO, ALLAN L

 Address:
 2189 SUNSHINE BLVD #A
 Address:
 1990 50TH STREET SW

 City-St-Zip:
 NAPLES, FL 34116
 City-St-Zip:
 NAPLES, FL 34116

Title: D (X) Delete Title: () Change () Addition

 Name:
 MORALES, CARLOS JR
 Name:

 Address:
 2189 SUNSHINE BLVD #A
 Address:

 City-St-Zip:
 NAPLES, FL 34116
 City-St-Zip:

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: ALLAN PERDOMO P 09/08/2005