2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137446

Entity Name: CLIVE GOSIA ENTERPRISES, INC.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7087 GRAND NATIONAL DRIVE 861 NORTH ALAFAY TRAIL SUITE 100 ORLANDO, FL 32828 US

ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

7087 GRAND NATIONAL DRIVE 861 NORTH ALAFAY TRAIL SUITE 100 ORLANDO, FL 32828 US

SUITE 100 ORLANDO, FL 32819

FEI Number: 20-2733256 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:

LAVIGNE, JAMES R
7087 GRAND NATIONAL DRIVE
861 NORTH ALAFAYA TRAIL
SUITE 100
ORLANDO, FL 32819 US
ORLANDO, FL 32819 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: CLIVE LEWIS 04/26/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: LEWIS, CLIVE Name: LEWIS, CLIVE

Address: SUN AND SPLENDOR PUB TACHBROOK ROAD Address: 12640 VICTORIA PLACE CIRCLE, APT. 8310

City-St-Zip: CV31 3 DU ENGLAND, City-St-Zip: ORLANDO, FL 32828 US

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

Name: LEWIS, MALGORZATA Name: LEWIS, MALGORZATA

Address: SUN AND SPLENDOR PUB TACHBROOK ROAD Address: 12640 VICTORIA PLACE CIRCLE, APT. 8310

City-St-Zip: CV31 3 DU ENGLAND, City-St-Zip: ORLANDO, FL 32828 US

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: CLIVE LEWIS DP 04/26/2005