2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155681

BLAKE, DIANE E

TROY, MI 48098 US

6966 CROOKS ROAD, SUITE 22

Name:

Address:

City-St-Zip:

Entity Name: SSRB. INC.

FILED May 23, 2005 Secretary of State

	iner corres, iiv	O .		
Current Principal Place of Business:			New Principal Place of Business:	
2211 SW DAVIE, FL	102ND DRIVE . 33324			
Current Mailing Address:			New Mailing Address:	
SUITE 22	OKS ROAD			
TROY, MI	: 72-1589101	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address of	F New Registered Agent:
2211 SW DAVIE, FL		submits this statement for the	nurnose of changing its registered	l office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its registered	ronice of registered agent, or both,
SIGNATU				
	Electror	nic Signature of Registered Aલ્	gent	Date
		3(2)(b), F.S., the corporation did r g Trust Fund Contribution ().	not receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () SPELLBERG, V 2211 SW 102N DAVIE, FL 333	D DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	BLAKE, RICHA	ROAD, SUITE 22	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SEC () SPELLBERG, A 2211 SW 102N DAVIE, FL 333	D DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	TREA () Delete	Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD M BLAKE VP 05/23/2005