## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04798

Entity Name: TRAFFICOPTERS INC.

OKEECHOBEE, FL 34974

City-St-Zip:

FILED Feb 15, 2005 Secretary of State

Entity Na	IIIE: IRAFFIC	OPTERS, INC.			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	20TH TRAIL OBEE, FL 349	72		2810 NW 20TH TRAIL OKEECHOBEE, FL 349722061 US	
Current N	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
	20TH TRAIL OBEE, FL 349	72		2810 NW 20TH TRAIL OKEECHOBEE, FL 349722061	
FEI Number	: 35-1420209	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:					
1200 S. PI PLANTAT The above	ORATION SYS NE ISLAND RO ION, FL 33324 Inamed entity of Florida.	OAD 1 US	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI					
	Electro	nic Signature of Registered Agg	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ROGERS, RAN 4232 SW 16TH OKEECHOBEE	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D ( ROGERS, MAF 4232 SW 16TH	· · · · · · · · · · · · · · · · · · ·	Title: Name: Address:	() Change () Addition	

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: MARY DIANE ROGERS DIR 02/15/2005