

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90184 005 ***150.00

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04112005 Chg-P CR2E034 (10/03)

4. FEI Number
94-1654621

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BENNETT, A.M.
1600 N.W. 163 STREET
MIAMI, FL 33169

7. Name and Address of New Registered Agent

Name **RON SEDIA**

Street Address (P.O. Box Number is Not Acceptable)
15960 N.W. 15TH AVENUE

City **MIAMI** FL Zip Code **33169**

8. 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. I am familiar with, and accept the obligations of registered agent:

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-electing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Delete
TS	STURROCK, WILMA J.	13350 MONTE BELLO ROAD	CUPERTINO, CA 95014	☐
D	STURROCK, WILMA J.	13350 MONTE BELLO ROAD	CUPERTINO, CA 95014	☐
P	REISEN, DONN P.	2659 ALPINE ROAD	MENLO PARK, CA 94025	☐
DC	DRAPER, PAUL	17100 MONTE BELLO RD.	CUPERTINO, CA 95014	☐
COO	VERNON, MARK	12119 FOOTHILL LANE	LOS ALTOS HILLS, CA 94022	☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change	☐ Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with any persons, with all other like empowered.

SIGNATURE

Signature and typed or printed name of signing officer or director

DATE

Daytime Phone

W. J. Sturrock **4/22/05** **408 868-1312**