2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P38021

FILED Mar 15, 2005 8:00 am Secretary of State 03-15-2005 90035 049 ***150.00

1. Entity Name PROSPEC	CT ENTERPRISES, INC.							
Principal Place of Business 550 CERES AVENUE LOS ANGELES, CA 90013		Mailing Address 21333 OXNARD STREET FIRST FLOOR WOODLAND HILLS, CA 91367-5017			IIITI ITIN TEKA KEEN DE		0026	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02142005	Chg-P	CR2E03	4 (10/03)	
City & State		City & State		4. FEI Number 95-1890				olied For Applicable
Zip	Country	Zip	Country		of Status Desired		8.75 Addi	tional
6. Name and Address of Currer		Registered Agent		7. Name and	Address of New F	Registered Ac	ent	
	*****		Name					
PARACORP INCORPORATED 236 E 6TH AVE TALLAHASSEE, FL 32303			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code	· · · · · · · · · · · · · · · · · · ·
8. The above	named entity submits this statement ons of registered agent.	for the purpose of changing it	s registered office or re	gistered agent, or both	n, in the State of Flo		miliar with,	and accept
SIGNATURE_	ons or registered agent.			•				
0.0	Signature, typed or printed name of registered age	int and title if applicable. (NO	TE: Registered Agent signature	required when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550	9. Election Camp. Trust Fund Cor		\$5.00 May Be Added to Fees				
10.	OFFICERS AN	D DIRECTORS	11.	ADDITIONS/0	CHANGES TO OFF	FICERS AND I	DIRECTORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOB DOIZAKI, ERNEST Y. 550 CERES AVENUE LOS ANGELES, CA 90013	☐ Delete	TITLE CO	OB OIZAKI, ERNI 50 Ceres Ave os Angeles,	EST Y.		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LANTER, JAMES 550 CERES AVENUE LOS ANGELES, CA 90013	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition
TITLE — NAME STREET ADDRESS CITY-ST-ZIP	CARTER, PEGGY 550 CERES AVENUE s		NAME C STREET ADDRESS 5		RTER, PEGGY Ceres Avenue Angeles, CA 90013			Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ANKER, SAMUEL NA 21333 OXNARD ST FIRST FLOOR STR		NAME R STREET ADORESS 5		T, CORDY Ceres Avenue Angeles, CA 90013			Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
j 12. I hereby	certify that the information supplied v	vith this filing does not qualify t	for the exemption stated	d in Section 119 07/3\6) Florida Statutes	I further cert	fy that the in	oformation.

indicated on this report or supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or suppliermental report is true and accurate and that my signature shalf have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or flustee 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 an address, with all other like empowered.

SIGNATURE:

213 612-0350

Daytime Phone #