


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2005 8:00 am
Secretary of State

02-17-2005 90029 028 ***150.00

DOCUMENT # P93000082329 1. Entity Name FAMOUS CHOICE, INC.																													
Principal Place of Business 525 S CYPRESS RD POMPANO BEACH FL 33064			Mailing Address 9901 N.W. 17TH ST CORAL SPRINGS FL 33071																										
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																											
City & State Zip		City & State Zip		4. FEI Number 65-0451178 Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																											
6. Name and Address of Current Registered Agent THIRER, MARTIN 1475 W. CYPRESS CREEK RD., #204 FT LAUDERDALE FL 33309			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																										
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">D</td> <td style="width: 30%;">Delete <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td>SHAH, BHARAT H</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>525 S CYPRESS RD</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>POMPANO BEACH FL 33064</td> <td></td> </tr> </table>			TITLE	D	Delete <input type="checkbox"/>	NAME	SHAH, BHARAT H		STREET ADDRESS	525 S CYPRESS RD		CITY- ST- ZIP	POMPANO BEACH FL 33064		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">Change <input type="checkbox"/></td> <td style="width: 30%;">Addition <input type="checkbox"/></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	Change <input type="checkbox"/>	Addition <input type="checkbox"/>	NAME			STREET ADDRESS			CITY- ST- ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 an address, with all other like empowered.																													
SIGNATURE: Bharrat H Shah (BHARAT H. SHAH) 3/10/05 (954)341-0951 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																													

(954) 592-7073