2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 17, 2005 08:00 AM Secretary of State

× 625-5303

5. Certificate of Status Dealed Seature Colored Seature Dealed Sea	1, Entity Na	IMENT # P94000025303		Secretary of State	
DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0480091 5. Name and Address of Current Registered Agent HARRIS, RICHARD H 8400 N, ANDREWAVE STE 320 BOCA RATON, FL 33431 4. The above named entity submits this statement for the purpose of changing its registered disca or registered agent, or both in the State of Royalds I am femiliar with, and accept the obligations of registered agent. SIGNATURE FILE NOWILI FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 TILL MAGE SINTER ADDRESS OFFICENCY STAP TILL MAGE SIRET ADDRESS OFFICENCY STAP DO NOT WRITE IN THIS SPACE 1. THIS SPACE DO NOT WRITE IN THIS SPACE Added to Fees DO NOT WRITE IN THIS SPACE 1. THIS SPACE DO NOT WRITE IN THIS SPACE	C/O RICHARD HARRIS & ASSOC., P.A. C/O RICHARD HARRIS & ASSOC 6400 N ANDREWS AVENUE #320 C/O RICHARD HARRIS & ASSOC 6400 N ANDREWS AVENUE #320		#320		
S. Name and Address of Current Registered Agent HARRIS, RICHARD H HA	223	OO NOT WRITE IN THIS SP	TCE	01282005 No Chg-P CR2E034 (10/03)	
B. Name and Address of Current Registered Agent HARRIS, RICHARD H 8400 N. ANDREWAVE STE 320 BOCA RATON, FL 33431 S. The above named entry 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 hade or private agent and the appropriate agent and applicate market when attendance) FILE NOWILL FEE IS \$150,00 After May 1, 2005 Fee will be \$350.00 10. OFFICERS AND DIRECTORS SIRET ADDRESS CITY-ST-2P TITLE NAME SIRET ADDRESS CITY-ST-2P TIT				65-0480091 Not Applicable 5. Cartificate of Status Desired \$8.75 Additional	
the obligations of registered agent. SIGNATURE FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ITILE NAME SIRET ADDRESS CITY-ST-2P TITLE NAME SIRET	6400 N. A STE 320	RICHARD H NDREW AVE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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TITLE NAME STREET ACORESS CITY-ST-ZIP TITLE	TITLE NAME STREET ADDRESS	D SNYDER, ARTHUR E 10724 MONTE VISTA COURT			
NAME STREET ADDRESS CITY-ST-ZIP DO NOT WRITE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE	TITLE NAME STREET ADDRESS	TON WITHER TOOM		02/17/05-80007-008 150.00	
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NAME STREET ADDRESS CITY-ST-ZIP TITLE	NAME Street Address		<u> </u>	IN THIS SPACE	
Process	NAME STREET ADDRESS				
STREET ADDRESS CITY-57-ZIP 12. I hereby certify that the information supplied with this filling 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	NAME STREET ADDRESS CITY-ST-ZIP				