2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 12, 2005 08:00 AM Secretary of State

DOCUMENT # P94000030792 I. Entity Name CUSTOM COACH, INC.			Secretary of State			
220 S.W. 33RD ST.	ailing Address 220 S.W. 33RD ST. T. LAUDERDALE, FL 33315		# #### ### #	O 172311 Maria (Maria (Maria (Maria	ר משנו לו השאונות שונים שוששון הנוסט הוווף שעונים ו	
DO NOT WRITE IN THIS SPAC		CE	02082005 4. FEI Numbe 65-048	No Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BECKER, KLAUS J 220 S.W. 33RD ST. FT. LAUDERDALE, FL 33315		DO NOT WRITE IN THIS SPACE				
The above named entity subjidts this statement for the the obligations of pegistered agent. SIGNATURE Signature. Syped or printed name of registered agent and title.		ed office or register		th, in the State of Flo	rida. I am familiar with, and accept 2-9-Zoo5 DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campalgn Final Trust Fund Contribution.		.00 May Be led to Fees			
10. OFFICERS AND DIFFE TITLE NAME STREET ADDRESS CITY-ST-ZIP D BECKER, KLAUS J 220 S.W. 33RD ST. FT. LAUDERDALE, FL 33315	CTORS			JIONO 02/14/0:	00227731 5-80010-022 150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE					·· <u></u>	
NAME STREET ADDRESS CITY-ST-ZIP	ł .		DO NOT WRITE IN THIS SPACE			
NAME STREET ADDRESS CITY - ST-ZIP			11/1	1 MIS SF	ACE	
TITLE NAME STREET ADDRESS CITY-SY-ZIP						
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
12. I hereby certify that the information supplied with this indicated on this report or supplemental report is true of the corporation or the receiver or trustee empowere changed, or on an attachment with an address, with a	filing does not qualify for the exe and accurate and that my signs of to execute this report as requ iff other like empowered.	mption stated in Se ture shall have the ired by Chapter 60	ection 119.07(3) same legal effec 7, Florida Statute	(i), Florida Statutes. ct as if made under o es; and that my nam	I further certify that the information path; that I am an officer or director e appears in Block 10 or Block 11 if	

Date

Daytime Phone ¥