## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 09, 2005 08:00 AM Secretary of State

1. Entity Nan	MENT # P9400003656 LORIDA, INC.	89			Sec	cretary	of State
· ·	DOORE DRIVE	failing Address 106 COMMODORE DRIVE JUPITER, FL 33477	, <b>-x</b>		,		
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent				02282005 No Chg-P CR2E034 (10/03)  4. FEI Number			
106 COM	NS, RAPHAEL MODORE DRIVE FL 33477	DO NOT WRITE IN THIS SPACE					
8. The above named entity submits this statement for the purpose of changing its registered office or registered egent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, speed or printed name of registered agent and liftle if applicable. (NOTE Registered Agent algorithms required when reinstating)  DATE  9. Election Campaign Financing After May 1, 2005 Fee will be \$550.00  Trust Fund Contribution.							
10	OFFICE AND PIPE	OTOPS -	····		THE RESERVE TO SERVE AND ADDRESS OF THE PERSON OF THE PERS	·	<del></del> , -
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DPTS SOLOMONS, RAPHAEL 106 COMMODORE DRIVE JUPITER, FL 33477				 000000 03/09/05-	1256476 80017-007	7 150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u>-</u> • • <u> </u>	IN .	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					<del></del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated	certify that the information supplied with this f on this report or supplemental report is true	iling does not qualify for the exent and accurate and that my signated	nption stated in Sec ure shall have the s	ction 119.07(3) ame legal effect	(i), Florida Statutes. I ct as if made under o	further certify that ath; that I am an c	the information officer or director