## 2005 FOR PROFIT CORPÓRATION ANNUAL REPORT

SIGNATURE: .

## FILED Mar 23, 2005 08:00 AM Secretary of State

1. Entity Na	JMENT # P940000877 me INSULTING, INC.	08		5	ecretary of Stat
300 5TH AV	ce of Business /E S	Mailing Address 300 5TH AVE S			
#101 NAPLES, FL	. 34102 US	#101 NAPLES, FL 34102 US	·		
				01252005 No Chg-P	CR2E034 (10/03)
L	OO NOT WRITE	N THIS SPA	CE	4. FEI Number 65-0547894	Applied For Not Applicable
				5. Certificate of Status Desired	\$8.75 Additional Fee Required
300 5TH A #101	6. Name and Address of Current Reg , HELMUT AVE S FL 34102	istered Agent		DO NOT W IN THIS SI	<del>ૡ૿૽ૡૢ૾૱૽૽ૺઌૢઌ૽ૢઌૢ૽૽ૢ૽૽૽ૹૢૻ૱ૢ</del> ૢૢૢૢૢૢૢૢૢ૽૽૽ૢ૽૽૽ૢ૽૱૱૽ૺ૽૽૽ઌ૽૽૽૽ૺ૽ઌ૽૽૽૽ઌ૽૽૽
SIGNATURE.	Sonature, typed or printed name of regulared agent and to  E NOW!!! FEE IS \$150.00  ay 1, 2005 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.	id Agent signature required noting \$5.	when resistaing)  OO May Be aid to Fees	DATE
10.	OFFICERS AND DIR	CTORS			
TITLE	PSD			and deposit of the control of the co	
NAME	FRITSCH, HELMUT 300 5TH AVE S #101			02130 00	0273503 -80034-010  50.00
STREET ADDRESS City-St-Zip	NAPLES, FL 34102			a ang ang <del>gyapawas</del> Tangkan ang bangganan	1240111 120 00 1
TITLE	VPTD				
NAME	FRITSCH, KIRSTEN				
STREET ADDRESS	300 5TH AVE S #101				
TY-SI-ZIP	NAPLES, FL 34102	-			
iitle Vame				dispundo Caldalla <b>(1966)</b> Aliantesa de la Caldalla (1966)	
STREET ADDRESS CITY-ST-ZIP				DO NOT W	RITE ACE
ITLE				IN THIS SE	ACE
NAME Itreet adoress hty-st-zip					
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AME		;			
TREET ADDRESS					
ITLE			entiquese such els laca	ร์สาราช เกิดได้เกิดเกิดได้เหลือได้เลื่องเลือดได้เลื่องให้เลื่องให้เลื่องให้เลื่องให้เลื่องให้เลื่องให้เลื่องให เราได้ เราได้	agest of their a proper spiriture timbe amount.
AME					
TREET ADDRESS			History is		
XTY-ST-ZIP	artify that the information complied with this	illing does not qualify for the even	notion stated in Sec	tion 119.07(3)(i). Florida Statutes 1	further certify that the information
Indicated of the corp changed,	ertify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowers or on an attachment with an address, with	and accurate and that my signated to execute this report as required to the state of the state o	ure shall have the sa ed by Chapter 607,	ame legal effect as if made under o Florida Statutes; and that my name	ath; that I am an officer or director appears in Block 10 or Block 11 if

Helmut Fritsch President 3/20/05 239-2633080

SIGNATURE AND PRIOR DE PRIOR DE SIGNING OFFICER ON DIRECTOR