2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 13, 2005 8:00 am Secretary of State

DOCUI	MENT # P940000904		05-04-2005 90190 041 ***150.00					
1, Entity Name								
Principal Place	of Business	Mailing Address			00HF0			
-6440 NE 4TI MIAMI: FL 31		6440 NE-4TH CT MIAMI, FL-33138 US		660	22756	-		
1831 84	138 US RICKEII. BAY DR # 1403			i Compression	N (NITE NEW NORM NOVE	nia auror ausu onisel	TITIN ITORA 10ETROE II TRUE	
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				04292005				
DO NOT WRITE IN THIS SPACE					No Chg-P	CR2E034		
	O 1107 177111E	-	4. FEI Number Applied F 65-0551 564 Not Appli					
				5. Certificate	of Status Desired		3.75 Additional e Required	
	6. Name and Address of Current Reg	istered Agent	<u> </u>	<u> </u>			a wadning	
KEE, ALLE	:N	_		DO	NOT W	DITE		
BAND NEATH CT. 1331 BRICKE 11 13A4 DR. #1403					DO NOT WRITE			
MIAMI, FL	33/3/			IN .	THIS SF	PACE		
	named entity submits this statement for the	purpose of changing its register	red office or register	ed agent, or bo	th, in the State of Fi	orlda. I am fan	niliar with, and accept	
me obligati	ons of register of lagent.	o a			• •			
SIGNATURE _	Signature, typed or printed name of registered agent and t	te il applicable. (NOTE, Registere	ed Agent signesine required	when reinstating)		DATE		
		9. Election Campaign Final	ncino \$5	.00 May Be				
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Trust Fund Contribution,		ed to Fees				
10.	OFFICERS AND DIF	ECTORS	1					
TITLE NAME	D ALLEN, KEE :		1					
STREET ADDRESS	6440 NE 4TH CT.		f					
CITY-ST-ZIP TITLE	MIAMI, FL 33138 :		-{					
NAME			Ī					
STREET ADDRESS City-St-JP	٠						ţ	
TITLE			1					
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CITY-ST-ZP			1		NOT W		ļ	
. TITLE . NAME				IN .	THIS SI	PACE		
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STREET ADDRESS CITY-ST-ZIP								
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NAMÉ STREET ADDRESS						. ••		
CITY-ST-ZIP			<u> </u>					
12. I hereby of indicated	certify that the information supplied with the on this report or supplemental report is tru poration or the receiver or trustee and poye	s filing does not qualify for the exe and accurate and that my signa	emption stated in Se truck shall have the	ction 119.07(3) same legal effec	i), Florida Statutes. It as if made under	I further cartily oath; that I am	that the information an officer or director	
of the cor changed.	poration or the receiver or trustee efficacy of or on an attachment with an address, with	red to execute this report as requiall other tike empowered.	ifed by Chapter 607	r. Florida Statute	s; and that my nam	e appears in B	lock 10 or Block 11 if	
SIGNAT	URE:				6/9/20	505	3573F3-17 7 3	
J. J. 1771		TED NAME OF BIGHING OFFICER OR DIRECT	TOR		Dete	Dayl	me Phone #	