2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)					FILED	
DOCUMENT # P95000025112 1. Entity Name INTARSIA, INC.					Apr 07, 2005 08:00 AM Secretary of State	
Principal Place of Business 9550 SATELLITE BLVD, STE. 180 ORLANDO FL 32837		Mailing Address 9550 SATELLITE BLVD. STE. 180 ORLANDO FL 32837		180		
2. Principal Place of Business		3. Mailing Address				
Suite. Apt #, etc.		Suite, Apt. #, etc.			1st MOORE CR2E034 (10/04)	
City & State		City & State			4. FEI Number 59-3318365 Applied For Not Applicable	
Zip	Country	Zip	Couni	try	5. Certificate of Status Desired Status Desired Status Desired Fee Required	
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent	
LUTHER, MARSHALL 867 SWEETWATER ISLAND CIRCLE					P.O. Box Number is Not Acceptable)	
LON	IGWOOD FL 32779					
				City FL Zip Code		
8. The above the obligati	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	d office or registere	red agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE _	Signature, typed or printed name of registered agent an	d title if applicable (NOTE	E Registered	Agent signature required	d when reinstating) DATE	
After	ILE NOW!!! FEE IS \$150.00 May 1, 2005 Fee Will Be \$550.00 Payable to Florida Department of S	State		. *… 	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND D		11.	·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME STREET ADDRESS	PTD LUTHER, MARSHALL 867 SWEETWATER ISLAND CIRCLE LONGWOOD FL	Delete		T ADDRESS ST-ZIP	Change Addition U00000290774 04/07/05-80003-010 150.00	
NAME STREET ADDRESS	D BERTRAND, GARY 9107 SLOANE ST ORLANDO FL 32827	Delete	THLE NAME STREE - CITY	LADDRESS ST-ZIP	Change Addition	
NAME STREET ADDRESS	D LOMBARDO, WILLIAM 10 OAKLEAF COURT SAFETY HARBOR FL 34695	Delete	TITLE NAME STREE CITY-1	T ADDRESS ST-ZIP	Change Addition	
NAME STREET ADDRESS	D SACK, BURTON M. 415 LIAMBLANCE DR PENT D LONGBOAT KEY FL 34228	🗌 Delete	OTLE NAME STREE CITY-S	TADDRESS 51-ZIP	Change Addition	
NAME STREET ADDRESS	D SMITH, RICHARD 9120 SLOANE ST ORLANDO FL 32827	Delete	TITLE NAME STREE GITY-S	adoress Si-zip	Change Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITEE NAME STREET CITY-S	I ADDRESS	Change Addition	
12. I hereby certify that the information supplied with this filing 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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:						