2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 25, 2005 8:00 am **Secretary of State** DOCUMENT # P95000027893 1: Entity Name 01-25-2005 90037 007 ***150.00 TREND DEVELOPMENT ENTERPRISES, INC. Mailing Address Principal Place of Business 33246 SOMERSET DR. PO BOX 895338 40005844 LEESBURG FL 34788 LEESBURG FL 34789 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 Applied For 59-3309459 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CARUSO PAUL BERG, FORREST Street Address (P.O. Box Number is Not Acceptable) 33246 SOMERSET DR LEESBURG FL 34788 City EUSTIS 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. TITLE TITLE PRESIDENT Change Delete BERG, FORREST NAME PAUL CARUSO 33246 SOMERSET DRIVE STREET ADDRESS 2612 MONTECITO AVE STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788 CITY-ST-ZIP EUSTIE, PL ☐ Delete TITLE X Addition HOLLAND, MICHAEL NAME CYNTHIA CARUSO PO BOX 895338 2612 MONTECITO AUE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34789 CITY-ST-7IP ☐ Change ☐ Addition TITLE NAME NAME NOWELL, JAMES STREET ADDRESS STREET ADDRESS PO BOX 895338 CITY-ST-ZIP CITY-ST-7IP LEESBURG FL 34789 ☐ Addition TITLE TITLE NAME MOWELL, JAMES 14915 US HWY 441 #12 STREET ADDRESS STREET ADDRESS TAVARES FL 32778 C1TY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

ICER OR DIRECTOR

with an address, with all other like empowered.

changed, or on an attachment

SIGNATURE:

FILED