2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 29, 2005 8:00 am Secretary of State **DOCUMENT # P95000045425** 04-29-2005 90228 043 ***150.00 1. Entity Name DOLPHIN 1995, INC. Principal Place of Business Mailing Address 14008208 HAS CULF OF MEXICO DRIVE 561 Halyard 1820 RINGLING BLYD 561 Halyard Lane Lane LONGBOAT KEY, FL 33228 Longboat Key, FL 34228 CR2E034 (10/03) 04202005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0591434 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HANKIN, LAWRENCE M P.A. DO NOT WRITE 1820 RINGLING BLVD SARASOTA, FL 34236 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PΩ TITLE FERRIS, ROBERT D NAME 2389 RINGLING BLVD, STE. D STREET ADDRESS SARASOTA, FL 34237 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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: _

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Robert D. Ferris

4/22/2005

941-954-6977

FILED