2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 24, 2005 8:00 am DOCUMENT # P96000038941 **Secretary of State** RYDÉR, INC. OF FLORIDA 02-24-2005 90035 030 ***150.00 Principal Place of Business Mailing Address 3600 NW 82ND AVE 3600 NW 82ND AVE MIAMI, FL 33166 MIAMI, FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02102005 Chg-P CR2E034 (10/03) 4. FEI Number City & State City & State Applied For 65-0838552 Not Applicable Country Zip Country Zip \$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 FATOVIL ROBERT D. O'MEARA, VICKI A Street Address (P.O. Box Number is Not Acceptable) 3600 N.W. 82ND AVENUE MIAMI, FL 33166 3600 N-W. 82ND AVE City Zip Code - 33/66 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 age 2/10/05 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 1S \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PS TITLE ☐ Delete TITI F ☐ Change noitibh [7] SWIENTON, GREGORY T NAME NAME 3600 NW 82ND AVE STREET ADDRESS STREET ADORESS CITY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP VPT ☐ Delete TITLE ☐ Change Addition TITLE NAME LEINBACH, TRACY NAME STREET ADDRESS 3600 NW 82 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI, FL 33166 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 changed, or on an attachment with an address, with all other like empoyaged. TRACY A. LEINBACH

FILED

Daytime Phone #

ATTACHMENT

P96000038941

1/04

[SHELF COMPANY]

RYDER, INC. OF FLORIDA (Florida)

OFFICERS

GREGORY T. SWIENTON TRACY A. LEINBACH

PRESIDENT & SECRETARY VICE PRESIDENT & TREASURER

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