2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 21, 2005 08:00 AM Secretary of State

2901 STIRLING RD SUITE 300 FT LAUDERDALE, FL 33312 PT LAUDERDALE, FL 33312 2901 STIRLING RD SUITE 300 FT LAUDERDALE, FL 33312 01122005 No Chg-P CR2E034 (10/03) 4. FEI Number 65-0125926 Applied 65-0125926	, INC.
DO NOT WRITE IN THIS SPACE 01122005 No Chg-P CR2E034 (10/03) 4. FEI Number 65-0125926 Applied Not Ap 5. Certificate of Status Desired □ \$8.75 Addition Fee Required	
	VRITE IN THIS SPACE 01122005 No Chg-P CR2E034 (10/03) 4. FEI Number 65-0125926 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
PRASHATER, MICHAEL 2901 STIRLING RD SUITE 300 FT LAUDERDALE, FL 33312 DO NOT WRITE IN THIS SPACE	DO NOT WRITE
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 the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstaurig) DATE	x 1/14/05
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	\$ 100:00
10. OFFICERS AND DIRECTORS 1ITLE PST NAME RUFFIN, PHIL 100000186686 5TREET ADDRESS 1522 S. FLORENCE 01/21/05-80068-001 300. CITY-ST-ZIP WICHITA, KS 67209	U00000186686 01/21/05-80068-001 300.00
TITLE D NAME RUFFIN, PHIL STREET ADDRESS 1522 S FLORENCE CITY-ST-ZIP WICHITA, KS 67209	
TITLE NAME SIRRET ADDRESS CITY-ST-ZIP DO NOT WRITE	· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST-ZIP	
NAME SIRET ADDRESS CITY-ST-ZP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Floxida Statutes. I further certify that the inform 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 am an ordificer or did of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my parent in Block 10 or Block.	a supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information