


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2005 8:00 am
Secretary of State

04-14-2005 90106 008 ***150.00

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| DOCUMENT # P96000049955 |  |
| 1. Entity Name EGS ASSOCIATES INC | |

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| Principal Place of Business 1320 10TH STREET SARASOTA, FL 34237 | Mailing Address P.O. BOX 2372 SARASOTA, FL 34230 |
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| 2. Principal Place of Business 2013 10TH STREET | 3. Mailing Address Suite, Apt. #, etc. |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

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| City & State SARASOTA, FL | City & State |
| Zip 34237 | Country |
| Zip | Country |

01272005 Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0667000 | Applied For <input type="checkbox"/> Not Applicable |
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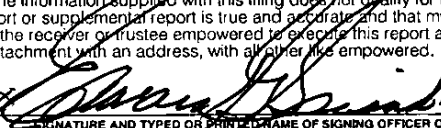
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent SPISAK, EDWARD G 1320 10TH STREET SARASOTA, FL 34237 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2013 10TH STREET City SARASOTA FL Zip Code 34237 |
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| 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:  EDWARD G. SPISAK | DATE: 4/11/05 |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SPISAK, EDWARD G 1320 10TH STREET SARASOTA, FL 34237 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2013 10TH STREET SARASOTA, FL 34237 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 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 fees empowered. | |
| SIGNATURE:  EDWARD G. SPISAK | Date: 4/11/05 (941) 362-0777 |