2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 08:00 AM
Secretary of State

Principal Place of Business 2902 STONEWALL PL, # 100 SANFORD, FL 32773 Principal Place of Business P.O. BOX 1951-43 WINTER SPRINGS, FL 32719-5143 O1112005 O112005 O1112005 O112005 O1112005 O1112005 O1112005 O1112005 O1112005 O1112005	licable
DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3389838 Applied 59-3389838 Not Applied 59-3389838 Not Applied 59-3389838 S. Certificate of Status Desired \$8.75 nonempto 6. Name and Address of Current Registered Agent TRNKA, JOSEPH 2902 STONEWALL PL, # 100	licable
5. Certificate of Status Desired S8.75 DODBDO 6. Name and Address of Current Registered Agent TRNKA, JOSEPH 2902 STONEWALL PL, # 100	
TRNKA, JOSEPH 2902 STONEWALL PL, # 100	
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 a the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and size if applicable. (NOTE: Registered Agent signature required when renstating) CATE	cept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 0 00000 U00000000000000000000000000	Q
10. OFFICERS AND DIRECTORS TITLE D NAME TRNKA, JOSEPH STRIET ADDRESS 4007 WATERVIEW LOOP CITY-ST-ZIP WINTER PARK, FL 32792	
TITLE NAME STREET ADDRESS GTY-ST-ZIP	
TIFLE NAME STREET ADDRESS CITY-ST-ZIP DO NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP 12. hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes I further certify that the information supplied with the inf	,. `

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR