| 2005 FOR PROFIT CORPORATION ANNUAL REPORT | FILED May 02, 2005 08:00 AM |
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| DOCUMENT # P97000027865 1. Entity Name PERSPECT, INC. | Secretary of State |
| Principal Place of Business - Mailing Address 1901 HARRIS AVE. POST OFFICE BOX 6284 KEY WEST, FL 33040 KEY WEST, FL 33041 | |
| DO NOT WRITE IN THIS SPACE | 04292005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 65-0737384 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| 6. Name and Address of Current Registered Agent PAULIK, ROMAN 1901 HARRIS AVE. KEY WEST, FL 33040 | DO NOT WRITE IN THIS SPACE |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent. SIGNATURE Remained agent. Signature, typed or primed name of registered agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent and the it applicable (NOTE Registered Agent Signature to agent an | 4-29-05 |
| 10. OFFICERS AND DIRECTORS ITTLE PSTD PAULIK, ROMAN STREET ADDRESS ITTLE I | U00000354728 05/03/05-80119-004 150.00 |
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| CITY-ST-ZIP Intereby certify that the information supplied with this tiling does not qualify for the exemption stated indicated on this report or supplemental report is true and accurate and that my signature shall have of the corporation or the receiver or trustee empowered to execute this report as required by Chapte changed, or on an attachment with an address, with all other like empowered. SIGNATURE: Boman Paulik Roman Paulik signature and typed or PRINTED NAME OF SIGNING OFFICER OF DIRECTOR | In Section (19.07(3)(1), Florida Statutes. I further certify that the information the same legat effect as if made under oath, that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if <u>President 4-29-05</u> 305-296-826 Date Dayline Phone # |

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