2005 FOR PROFIT CORPORATION

Jan 31, 2005 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P97000042275 NICOLAS G. SAKELLIS, P.A. Principal Place of Business Mailing Address **66 WEST FLAGLER ST** 66 WEST FLAGLER ST SUITE 600 SUITE 600 MIAMIL FL 33130 MIAMI, FL 33130 01122005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0757638 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE SAKELLIS, NICOLAS G 66 WEST FLAGLER STREET SUITE 600 IN THIS SPACE MIAMI, FL 33130 8. The above named en rement for the purpose of changing its registerac "Lity recommend event, or both in the State of Florida. I am familiar with and accept the obligations of SIGNATURE. Signature, typeway partiest name of registered agent and one a approache. (NOTE: Regulared Agent signature required when reinstaing) U00000206142 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 01/31/05-80075-001 150.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE SAKELLIS, NICOLAS G NAME STREET ADDRESS 66 WEST FLAGLER ST STE 600 CITY-ST-ZIP MIAMI, FL 33130 TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TETLE NAME STREET ADORESS CITY-ST-ZIP a title

12. I hereby certify that the information 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 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 of trustee impowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

HAME STREET ADDRESS CITY-ST-ZP

NAME OF SIGNING OFFICER OR DIRECTO

FILED