2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080557

Entity Name: C & H WEST INDIAN STORE OF NAPLES INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2894 E TAMIAMI TRAIL 4945 GOLDEN GATE PKWY STE 104

NAPLES, FL 34112 NAPLES, FL 34116 US

Current Mailing Address: New Mailing Address:

2894 E TAMIAMI TRAIL 4945 GOLDEN GATE PKWY STE 104

NAPLES, FL 34112 NAPLES, FL 34116 US

FEI Number: 59-3470944 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PLUMMER, CLIVE PLUMMER, CLIVE 2894 E TAMIAMI TRAIL PLUMMER, CLIVE 4945 GOLDEN GATE PKWY STE 104

NAPLES, FL 34112 US NAPLES, FL 34116 US

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.

SIGNATURE: CLIVE PLUMMER 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

DP () Delete

NAPLES, FL 34112

Name: PLUMMER, CLIVE Address: 2894 E TAMIAMI TRAIL

City-St-Zip: NAPLES, FL 34112

Title:

City-St-Zip:

Title: DST () Delete
Name: PLUMMER, HARDRESS
Address: 2894 E TAMIAMI TRAIL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

Name: PLUMMER, CLIVE

Address: 2894 E TAMIAMI TRAIL STE104

City-St-Zip: NAPLES, FL 34112

Title: DST (X) Change () Addition

Name: PLUMMER, HARDRESS Address: 2894 E TAMIAMI TRAIL STE104

City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLIVE PLUMMER DP 04/28/2005