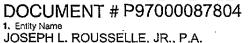
2005 FOR PROFIT CORPORATION ANNUAL REPORT





Principal Place of Business

601 W SWANN AVENUE, SUITE C TAMPA, FL 33606 US

Mailing Address

P. O. BOX 31

TAMPA, FL 33601-0031 US

FILED Apr 13, 2005 08:00 AM Secretary of State



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01132005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0781007

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROUSSELLE, JOSEPH L JR 601 W SWANN AVENUE, SUITE C TAMPA, FL 33606

DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS			The state of the s				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROUSSELLE, JR. J 800 W DELEON ST TAMPA, FL 33606		35,						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	IN .	THIS SPACE				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 like empowered.

SIGNATURE: