2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2005 08:00 AM Secretary of State

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ANNUAL REPORT				Apr 30, 2003 00.00			
1. Entity Nam	MENT # P980000028 ie holdings, inc.	47			Se	cretary	of State
Principal Place of Business Mailing Address							
5200 TOWN CENTER CIRCLE 5200 TOWN CENTER 306 306		5200 TOWN CENTER CIRCLE					
BOCA RATON, FL 33486 _US BOCA RATON, FL 33486		5					
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	TOTAL TARREST			4. FEI Numb			Applied For Not Applicable
			manage comment		of Status Desired		Additional
	6. Name and Address of Current Re	gistered Agent		1	··	Fee Req	uired
FINE, NORMAN D 5200 TOWN CENTER CIRCLE				DO	NOT W	RITE	
SUITE 306 BOCA RATON, FL 33486			-IN	THIS SF	ACE		
500A1VA10N,12 30400							
8. The above	named entity submits this statement for t	ne purpose of changing its register	ed office or registe	red agent, or bo	oth, in the State of Flo	orida. 1 am familiar v	vith, and accept
the obligat	tions of registered agent.						
SIGNATURE.	Signature, typed or printed name of registered agent and	titis il applicable (NOTE, Registere	d Agent signature require	d when reinstating)		DATE	<u></u>
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.	ncing \$5	.00 May Be ded to Fees	U0000 04/30/05)0346419 5-80073-022	2 150.00
10.	OFFICERS AND DI	RECTORS		1 TO 1 TO 1 A LOSS	A SOUTH OF THE PARTY NAMED IN		en e
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12. I hereby certify that the information supplied with this filing 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 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.

LAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: