

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000010821

FILED
May 02, 2005
Secretary of State

Entity Name: ANSCA OFFICE DEVELOPMENT, INC.

Current Principal Place of Business:

3333 SOUTH CONGRESS AVENUE #403B
SUITE 401
DELRAY BEACH, FL 33445

New Principal Place of Business:

7593 BOYNTON BEACH BLVD
SUITE 220
BOYNTON BEACH, FL 33437

Current Mailing Address:

3333 SOUTH CONGRESS AVENUE #403B
SUITE 401
DELRAY BEACH, FL 33445

New Mailing Address:

7593 BOYNTON BEACH BLVD
SUITE 220
BOYNTON BEACH, FL 33437

FEI Number: 65-0812772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERMAN, MITCHELL A PA
1301 NO CONGRESS AVE
SUITE 210
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

SHERMAN, MITCHELL A PA
7593 BOYNTON BEACH BLVD
SUITE 210
BOYNTON BEACH, FL 33437 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:

05/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCARDINA, CHARLES
Address: 3333 SO CONGRESS AV SUITE 401
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCARDINA, CHARLES
Address: 7593 BOYNTON BEACH BLVD #220
City-St-Zip: BOYNTON BEACH, FL 33437

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: CHARLES SCARDINA

PD

05/02/2005

Electronic Signature of Signing Officer or Director

Date