## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000064863

City-St-Zip:

VΡ

BROWN, PETER A

801 SEABREEZE BLVD.

Title:

Name:

Address:

City-St-Zip:

ZN MAKKUM, THE NETHERLANDS,

(X) Delete

FORT LAUDERDALE, FL 33316

FILED Apr 29, 2005 Secretary of State

Entity Nan	ne: NIGEL BI	JRGESS, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
BAHIA MAI	REEZE BLVD. R YACHTING ERDALE, FL 3						
Current Mailing Address:			New Maili	New Mailing Address:			
BAHIA MAI	REEZE BLVD. R YACHTING ERDALE, FL 3						
FEI Number:	65-0868943	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired (	)	
Name and	Current Registered Agent:	Name and	Name and Address of New Registered Agent:				
BAHIA MAI	PETER A REEZE BLVD. R YACHTING IDERDALE, FI						
The above in the State		submits this statement for the pu	rpose of changing i	ts registere	d office or registered agent, or	both,	
SIGNATUR	RE:						
	Electror	nic Signature of Registered Ager	nt		Date		
Election Can	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BECKETT, JON 16-17 PALLMA		Title: Name: Address: City-St-Zip:	P BECKETT, 4 16/17 PALL LONDON, E			
Title: Name: Address: City-St-Zip:	PONCHAU, DAI 16-17 PALLMA		Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition DANIEL AMA, 57 RUE GRIMALDI M 98000 MC		
Title: Name: Address:	D ( ) VEEMAN, SJOI POST OFFICE		Title: Name: Address:	VP BROWN, PI 801 SEABI	(X) Change ( ) Addition ETER A REEZE BLVD		

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FORT LAUDERDALE, FL 33316

() Change () Addition

SIGNATURE: PETER BROWN VΡ 04/29/2005